FILED VIA MAIL JACKSONVILLE, FLORIDA

OCT 04 2019

CLERK, U.S. BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA

> Check if this is an amended filing

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Middle District of Florida	
Case number (11 known).	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only In a Joint Case):
1.	Your full name		
!	Write the name that is on your government-issued picture	Sabrina	Brianna
	identification (for example,	First name	First name
:	your driver's license ar	Danielle Middle name	Elizabeth Middle name
	passport).		
	Bring your picture	Victory	Victory
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	All other names you	HERRICH OF Arms 1981 OF A CHARLES (MARIE CO.) A Photograph of the Charles Co. (Charles Co.) A Charles Co. (Charles Co.)	
۷.	have used in the last 8		Brianna
	years	First name	First name
	Include your married or	Middle name	Middle name
	maiden names.		Hollier
		Last name	Last name
			Brianna
		First name	First name
		Middle name	Middle name
			Trimble
		Last name	Last name
1019464	выченникарам ответиченицай честинай	onggangaggaggaggaggaggaggaggaggaggaggagga	
3.	Only the last 4 digits of	xxx - xx - <u>0</u> 4 <u>9</u> 4	xxx - xx - <u>3</u> 5 <u>0</u> 4
:	your Social Security	——————————————————————————————————————	
:	number or federal	OR	OR
:	Individual Taxpayer Identification number	9 xx - xx	9 xx - xx

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 2 of 88

	anielle Victory		C	Case number (if known)	
First Name Middle N	ome Last Name				
HEAVARETHINGS AND THE ANALYSIS ANALYSIS AND THE ANALYSIS ANALYSIS AND THE	About Debtor 1:	ering and the second of the se	regi i and di Markey (* Millianne and	About Debtor 2 (Spoi	use Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any bu	isinėss names o	r EINs.	☐ I have not used an	y business names or EINs.
the last 8 years	Business name	 		Business name	
Include trade names and doing business as names	Business name			Business name	
	EIN			EIN	
	EiN			EIN	
summer su	oscileren 1993 si diiniin kon 1885 sii TADANN 1995 sii Bidiininekapattassii Sepame	ngarrantiistelle (EC EC 224 C blikkelj s.C.) () (T bl Chop et per vinteme	gggggalait i i i i i i i i i i i i i i i i i i 	If Debtor 2 lives at a	different address:
	1015 NE 6th Ave				
	Number Street			Number Street	
	0 11 15'		24400		
	Crystal River	FL State	34428 ZIP Code	City	State ZIP Code
	Citrus				
	County			County	
	If your mailing address i above, fill it in here. Note any notices to you at this i	that the court w	vill send		address is different from Note that the court will send ling address.
	Number Street	<u></u>		Number Street	
	P.O. Box 1047		<u> </u>	P.O. Box	
	Old Town	FL	32680	1.0.00	
	City	State	ZIP Code	City	State ZIP Code
6. Why you are choosing	Check one:	gg gg CC CC eC un envenimente nu unannous sodigigata	DD DD DD BY 49 ABAAA AA AB BY JAMAAAA WAYAA	Check one:	·····································
this district to file for bankruptcy	Over the last 180 days I have lived in this dist other district.	before filing this rict longer than i	s petition, n any	Over the last 180 d I have lived in this other district.	lays before filing this petition, district longer than in any
	☐ I have another reason. (See 28 U.S.C. § 1408			☐ I have another reas (See 28 U.S.C. § 1	

De	ebtor 1 <u>Sabrina Da</u> First Name Middle Nam	<u>nielle V</u> ™	ictory Last Name		Case number (#	квошп)
P:	art 2: Tell the Court Abou	ıt Your B	ankrupto	cv Case		
	The chapter of the				Intine Required by 1	1 U.S.C. § 342(b) for Individuals Filing
Bankru	Bankruptcy Code you			orm 2010)). Also, go to the top o		
	are choosing to file under	🗷 Cha	pter 7			
		☐ Cha	oter 11			
		🖵 Cha	pter 12			
		☐ Cha	oter 13	nanci (113 saam lakin 65 cam) a qaasiissiin	والمعادد وال	i - novo e consiste de la Bartano reportada a la Bartano e e e e e e e e e e e e e e e e e e e
В.	How you will pay the fee	loca your subr with I nee App.	I court for self, you nitting you a pre-prined to pay lication fo	r more details about how yo may pay with cash, cashier our payment on your behalf, nted address. The fee in installments. If or Individuals to Pay The Filips	u may pay. Typica s check, or money your attorney may you choose this o	pay with a credit card or check ption, sign and attach the ents (Official Form 103A).
	***************************************	By la less pay	aw, a judo than 150 the fee in	ge may, but is not required t 0% of the official poverty line	o, waive your fee, that applies to yo this option, you r	ation only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to must fill out the Application to Have the twith your petition.
9.	Have you filed for bankruptcy within the	☑ No				
	last 8 years?	☐ Yes.	District	Wr	mM / DD / YYYY	Case number
			District	Wh		
			_		MM / DD / YYYY	
			District	Wh	MM / DD / YYYY	Case number
10	. Are any bankruptcy	2 No				And the second s
.*	cases pending or being		Debtor			Relationship to you
	filed by a spouse who is not filing this case with you, or by a business partner, or by an	- 103		Wr		Case number, if known
	affiliate?		Debtor			Relationship to you
				wr		
					MM / DD / YYYY	
11.	. Do you rent your residence?	☐ No. ☑ Yes.	_	r landlord obtained an eviction j	udgment against you	u?
				Go to line 12.		
				Fill out <i>Initial Statement About</i> of this bankruptcy petition.	an Eviction Judgmer	nt Against You (Form 101A) and file it as

ebtor 1 Sabrina Da	nielle Victory	Case number (4 know	vrd)
Report About Any E	Businesses You Own as a S	Sole Proprietor	
Are you a sole proprietor of any full- or part-time	☑ No. Go to Part 4.		
business?	☐ Yes. Name and location of l	business	
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as	Name of business, if any		
a corporation, partnership, or LLC.	Number Street		
If you have more than one sole proprietorship, use a separate sheet and attach it			
to this petition.	Cíty	State	ZIP Code
	Check the appropriate	box to describe your business:	
	Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))	
	Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51E	3))
		efined in 11 U.S.C. § 101(53A))	
	Commodity Broker	r (as defined in 11 U.S.C. § 101(6))	
	☐ None of the above		
If you are filing under Chapter 11, the court must know whether you are a small business debtor so can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach most recent balance sheet, statement of operations, cash-flow statement, and federal income tax reany of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). And I am not filing under Chapter 11.			
business debtor, see 11 U.S.C. § 101(51D).	☐ No. I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT a small business deb	otor according to the definition in
	Yes. I am filing under Chap Bankruptcy Code.	ter 11 and I am a small business debtor a	ccording to the definition in the
	,		
Report if You Own	or Have Any Hazardous Pro	pperty or Any Property That Needs	Immediate Attention
Do you own or have any	☑ No		
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any	☐ Yes. What is the hazard?		
property that needs immediate attention?	If immediate attention	n is needed, why is it needed?	
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			
	Where is the property	y? Number Street	
		City	State ZIP Code

Debtor 1

Sabrina	Danielle	Victory	
Eigel Mama	Middle Norms	/ not Name	

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing ab-	ou
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary walver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

i am	not	required	to receiv	ve a	briefing	about
cred	it co	unseling	because	e of:	: -	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Sabrin	a Dani	ielle Victory	Case number (if know	vo)		
) to condition	Minnie 149146	FOSTABLIC				
Part 6: Answer Th	ese Questi	ions for Reporting Purpos	es 			
16. What kind of debt	ts do		rily consumer debts? Consumer debt. al primarily for a personal, family, or house			
you nave.		☐ No. Go to line 16b. ☐ Yes. Go to line 17.				
			rily business debts? Business debts a evestment or through the operation of the b			
		No. Go to line 16c.☐ Yes. Go to line 17.				
		16c. State the type of debts you	u owe that are not consumer debts or busi	iness debts.		
17. Are you filing und Chapter 7?	der (☐ No. I am not filing under Ch	hapter 7. Go to line 18.	COMMITTEENING STATES AND STATES OF THE STATES AND STATE		
Do you estimate t		Yes. I am filing under Chapt administrative expense	ter 7. Do you estimate that after any exemes are paid that funds will be available to d	npt property is excluded and distribute to unsecured creditors?		
excluded and	•	No				
administrative ex are paid that fund available for distr to unsecured cre	ls will be ribution	☐ Yes				
18. How many credite		✓ 1-49	1,000-5,000	25,001-50,000		
you estimate that owe?		□ 50-99 □ 100-199 □ 200-999	☐ 5,001-10,000 ☐ 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000		
19. How much do you	u (2 \$0-\$50,000	☐ \$1,000,001-\$10 million	\$500,000,001-\$1 billion		
estimate your ass be worth?	(☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion		
and described of the second se		un exist of minimum existic 1972 (g. c.) incompanients existed to propy existence by incompressed (1999).	\$	To be the second and the second secon		
20. How much do you estimate your liak		☐ \$0-\$50,000 ☐ \$50,001-\$100,000	☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion		
to be?	{	\$100,001-\$500,000	☐ \$50,000,001-\$100 million	□ \$10,000,000,001-\$50 billion		
Part 7: Sign Belov		\$500,001-\$1 million	□ \$100,000,001-\$500 million	More than \$50 billion		
For you		have examined this petition, a correct.	nd I declare under penalty of perjury that	the information provided is true and		
	(If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
			nd I did not pay or agree to pay someone vand read the notice required by 11 U.S.C			
	1	request relief in accordance w	rith the chapter of title 11, United States C	ode, specified in this petition.		
	١		ult in fines up to \$250,000, or imprisonme	money or property by fraud in connection ent for up to 20 years, or both.		
		* Som	× B	Veit		
		Signature of Debtor 1	Signature	e of Debtor 2		
		Executed on 10/02/20	2/9 Executed	10n/0/02 12014		

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 7 of 88

For your attorney, if you are represented by one	to proceed under Chapter 7, 11, 12, or 13 of title available under each chapter for which the pers	tition, declare that I have informed the debtor(s) about eligibility at 1, United States Code, and have explained the relief on is eligible. I also certify that I have delivered to the debtor(s) in a case in which § 707(b)(4)(D) applies, certify that I have no
f you are not represented by an attorney, you do not need to file this page.		n the schedules filed with the petition is incorrect.
	Signature of Attorney for Debtor	MM / DD /YYYY
	Printed name	
	Firm name	
	Number Street	
	City	State ZIP Code
	Control above	Email address
	Contact phone	Enjan address
	Bar number	State

Debtor 1 Sabrina Danii First Name Middle Name	elle Victory Last Name	Case numb	(et (if known)
For you if you are filing this bankruptcy without an attorney	The law allows you, as ar should understand that themselves successfull	n individual, to represent yours many people find it extreme	long-term financial and legal
If you are represented by an attorney, you do not need to file this page.	technical, and a mistake or dismissed because you did hearing, or cooperate with firm if your case is selected	inaction may affect your rights. I not file a required document, p the court, case trustee, U.S. trus	pankruptcy case. The rules are very For example, your case may be ay a fee on time, attend a meeting or stee, bankruptcy administrator, or audit could lose your right to file another the automatic stay.
	court. Even if you plan to p in your schedules. If you do property or properly claim i also deny you a discharge case, such as destroying o cases are randomly audited	ay a particular debt outside of your order of your order or you may not be about as exempt, you may not be about all your debts if you do some or hiding property, falsifying reco	that you are required to file with the our bankruptcy, you must list that debt of be discharged. If you do not list le to keep the property. The judge can thing dishonest in your bankruptcy rds, or lying. Individual bankruptcy een accurate, truthful, and complete.
	hired an attorney. The cour successful, you must be fa	rt will not treat you differently be miliar with the United States Bar d the local rules of the court in w	you to follow the rules as if you had cause you are filing for yourself. To be nkruptcy Code, the Federal Rules of which your case is filed. You must also
	Are you aware that filing fo consequences? ☐ No ☑ Yes	r bankruptcy is a serious action	with long-term financial and legal
		ptcy fraud is a serious crime and ou could be fined or imprisoned	d that if your bankruptcy forms are 1?
	Did you pay or agree to pay ☐ No ☑ Yes. Name of Person Ri	ick Weaver(Court Source,	ey to help you fill out your bankruptcy forms? Inc,.) ation, and Signature (Official Form 119).
	have read and understood	-	involved in filing without an attorney. I filing a bankruptcy case without an not properly handle the case.
	Signature of Debtor 1	x	Butten
	Date (C) 0300/A		Date /0/02/26/19

Contact phone (619) 318-4524

Email address sabrinadvictory@gmail.com

Cell phone

Contact phone (619) 385-2165

Cell phone

Email address

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA

PETITION WORKSHEET

CASE NUMBER...: 19-03800-3F7

EBTOR: VICTORY, SABRINA DANIELLE OINT: VICTORY, BRIANNA ELIZABETH ILED: 10/04/2019 CASE TYPE: J COUNTY: 12017 HERE: JACKSONVILLE FIRST FLOOR [0] 300 NORTH HOGAN ST. SUITE 1-200 JACKSONVILLE, FL 32202	
RUSTEE: [ALTMAN, R]	
HEN FRIDAY NOVEMBER 15, 2019 AT 12:30 p.m. [42]	
EBTOR'S ATTY.: PROSE	
ATRIX INST. APP 20 LRG UNSEC. MATRIX (CH 11)	
ATRIX ON DISK SOAR	
RO SE 20 LRG UNSEC. LIST (CH 11)	
ISC. OF COMP	
EXHIBIT "A" (REQUIRED IF DEBTOR IS A CH 11 CORPORATION)	
SUMMARY OF SCHEDULES	
SCHEDULES A- J (INDICATE UNDER COMMENTS IF ANY ARE MISSING)	
DECLARATION UNDER PERJURY	
STATEMENT OF FINANCIAL AFFAIRS	
CH 7 STATEMENT OF INTENTIONS	
CHAPTER 13 PLAN	
OMMENTS: WAtlansho Weaver; applureura	
Def: SOFA SOI put Signed	
LAIMS BAR DATE: / / COMPLAINT DATE: / / ee information:	
otal -> (\$0.00)	

ebtor 1	Sabrina	Danielle	Victory	
	First Name	Middle Name	Last Name	_
Debtor 2	Brianna	Elizabeth	Victory	
Spouse, if filing) First Name	Middle Name	Last Name	
Inited States	Rankruntov Court fo	or the: Middle District of F	Florida	

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	\$
1a. Copy line 55. Total real estate, from Schedule A/B	*
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 44,754.49
1c. Copy line 63, Total of all property on Schedule A/B	\$ 44,754.49
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$51,944.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 122,736.15
Your total fiabilities	ş 174,680.15
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,333.33
Schedule J: Your Expenses (Official Form 106J) Capy your manthly expenses from line 22c of Schedule J	s 2,898.00

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 11 of 88

Deb	itor 1	Sabrina First Name	Danielle Middle Name	Last Name	Victory	C	Case number (if known)	
		rustivame	Mudic Mains	Lust Hame				
Pa	rt 4:	Answer The	se Questions fo	r Administ	rative and Sta	tistical Record	s	
6,	Are you	filing for ban	kruptcy under Cha	apters 7, 11,	or 13?			
	☐ No. ☑ Yes		ing to report on this	part of the fo	orm. Check this b	ox and submit this	form to the court with your othe	er schedules.
7.	What ki	nd of debt do	you have?	444			i i i i i i i i i i i i i i i i i i i	talijas karinina — m. A ssertino da a <u>utul Prassettino m. Wyzzone zyzy</u> Balia.
	☑ You fami	r debts are pr lly, or househol	lmarily consumer ld purpose." 11 U.S	debts . <i>Cons</i> .C. § 101(8).	<i>umer debts</i> are th Fill out lines 8-9g	ose "incurred by a for statistical purp	nn individual primarily for a pers loses, 28 U.S.C. § 159.	onal,
			ot primarily consulurt with your other s		ou have nothing t	to report on this pa	art of the form. Check this box a	nd submit
8.			of Your Current Mo OR, Form 122B Lin				income from Official	\$ 2,333.33
	1 1W 15 1111				. 505 -00 -0 -0,500	and the second second	and the second second of the second of the second s	s and a superior of the state of the superior
9.	Copy th	e following sp	pecial categories o	f claims fro	n Part 4, line 6 c	f Schedule E/F:		
							Total claim	
							rotai ciann	
	From	Part 4 on Sch	edule E/F, copy th	e following:				
	9a. Dom	nestic support o	obligations (Copy lin	e 6a.)			\$	
	9b. Taxe	es and certain	other debts you ow	e the governm	nent. (Capy line 6	6b.)	\$	
	9c. Clair	ms for death or	personal injury wh	le you were i	ntoxicated. (Copy	/ line 6c.)	\$	
	9d. Stud	lent loans. (Co	py line 6f.)				\$62,461.00	
	9e. Oblig prior	gations arising rity claims. (Co	out of a separation py line 6g.)	agreement o	r divorce that you	ı did not report as	\$:
	9f. Deb	ts to pension o	r profit-sharing plar	s, and other	similar debts. (Co	ppy line 6h.)	+ \$	
	9g, T ota	al. Add lines 9a	through 9f.				\$ 62,461.00	

itor 1	Sabrina	Danielle	Victory		
	First Name Brianna	Middle Name Elizabeth	Victory		
otor 2 ouse, if filing	g) First Name	Middle Name	Last Name		
ed States	s Bankruptcy Court for t	the: Middle District of Flo	orida		
		and things browner of the			
e number	r				Check if this is ar
					amended filing
fficia	l Form 106/	Λ /D			
IIICIa	11 01111 1007	<u> </u>			
che	edule A/E	3: Propert	У		12/15
ponsiblite your	le for supplying co name and case nu	rrect information. If m mber (if known). Answ	ete and accurate as possible. If two married people ore space is needed, attach a separate sheet to the ver every question. Land, or Other Real Estate You Own or Have	is form, On the top of a	
o you o	own or have any le	gal or equitable intere	st in any residence, building, land, or similar prop	erty?	
	3o to Part 2.			•	
	Where is the proper	rty?			
		•	What is the property? Check all that apply.	Do not deduct secured cla	iims or exemptions. Pu
			☐ Single-family home	the amount of any secure Creditors Who Have Claim	d claims on Schedule L
1.1. <u>St</u>	reet address, if availab	lle, or other description	Duplex or multi-unit building	Oreditals saio rase man	ns occareo by Propert
			☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of to portion you own?
			Land	entite property:	S
			☐ Investment property	Φ	4
Cit	tv	State ZIP Code	Timeshare	Describe the nature of	•
0,,	-1	5140 211 0040	Other	interest (such as fee the entireties, or a life	
			Who has an interest in the property? Check one.		
			Debtor 1 only		
	ounty	<u> </u>	Debtor 2 only	Observative de la company	
Co			Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	mmunity property
Co					
Co			☐ At least one of the debtors and another		
Co			Other information you wish to add about this it		
	n or have more that	n one, list here:			
	n or have more than	n one, list here:	Other information you wish to add about this it		ims or exemptions. Pu
fyou ow	n or have more than	n оле, list here:	Other information you wish to add about this it property identification number:	Do not deduct secured cla	d claims on Schedule L
f you ow		n one, list here:	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla	d claims on Schedule D ns Secured by Property
f you ow			Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured clathe amount of any securer Creditors Who Have Claim	d claims on Schedule Das Secured by Property Current value of t
f you ow			Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D ns Secured by Property Current value of the portion you own?
f you ow			Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured clathe amount of any securer Creditors Who Have Claim	d claims on Schedule Das Secured by Property Current value of t
f you ow 1.2	reet address, if availab	ife, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of	d claims on Schedule D ns Secured by Property Current value of to portion you own? \$
f you ow	reet address, if availab		Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured clatte amount of any securer Creditors Who Have Claim Current value of the entire property? Describe the nature clinterest (such as fee	d claims on Schedule Dans Secured by Property Current value of to portion you own? \$
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f you ow 1.2	reet address, if availab	ife, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured clatte amount of any securer Creditors Who Have Claim Current value of the entire property? Describe the nature clinterest (such as fee	d claims on Schedule L ns Secured by Property Current value of t portion you own? \$
f you ow	reet address, if availab	ife, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clatte amount of any securer Creditors Who Have Claim Current value of the entire property? Describe the nature clinterest (such as fee	d claims on Schedule Dans Secured by Property Current value of to portion you own? \$
f you ow	reet address, if availab	ife, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clatte amount of any securer Creditors Who Have Claim Current value of the entire property? Describe the nature clinterest (such as fee	d claims on Schedule E ns Secured by Property Current value of t portion you own? \$ of your ownership simple, tenancy by a estate), if known.

Official Form 106A/B

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 13 of 88

Manufactured or mobile home Land S State ZIP Code Timeshare Describe the nature of y interest (such as fee sim the entireties, or a life es with the entireties or a life es with the entireties, or a life es with the entireties or a life es with the	caims on Schedule to secured by Property Current value of the portion you own? \$
Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Other Who has an interest in the property? Check one. Describe the nature of y Interest (such as fee sim the entireties, or a life es who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.	Current value of t portion you own? \$
Land Investment property Describe the nature of y Interest (such as fee sim the entireties, or a life es who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Check if this is common (see instructions) At least one of the debtors and another (see instructions) Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Sample 2 on the page of the portion you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	imple, tenancy by estate), if known.
Investment property Timeshare City State ZIP Code Timeshare Other Interest (such as fee sin the entireties, or a life est who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Check if this is common (see instructions) Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Such as fee sin the entireties, or a life est who has an interest in the property? Check one. Check if this is common (see instructions) Check	imple, tenancy by estate), if known.
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.	πmunity property
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All least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. \$	\$
Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. S The scribe Your Vehicles The scribe Your Vehicles The scribe Your Vehicles The scribe Your Vehicles interest in any vehicles, whether they are registered or not? Include any vehicles	\$
Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: Describe Your Vehicles To you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	\$
you have attached for Part 1. Write that number here	\$
art 2: Describe Your Vehicles o you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	
o you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	
to you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	<u></u>
to you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	
to you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	
Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	
Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles	
ou own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.	
Cars, vans, trucks, tractors, sport utility vehicles, motorcycles	
☑ No ☑ Yes	
Yes Tes	
3.1. Make: Subaru Who has an interest in the property? Check one. Do not deduct secured claims	
Model: Crosstrek	
2018 Debtor 2 only	the second property of
Debtor 1 and Debtor 2 only	Current value of (
At least one of the debtors and another	•
Other information: Check if this is community property (see \$ 20,000.00 \$	\$ 20,000.0
jf2gtadc2j8257746 instructions)	·
Access to the Ac	
If you own or have more than one, describe here:	
3.2. Make: Nissan Who has an interest in the property? Check one. Do not deduct secured claims	
3.2. Make: Nissan Who has an interest in the property? Check one. Do not deduct secured claims the amount of any secured claims Some Double of the amount of the	claims on Schedule L
Make: Nissan Who has an interest in the property? Check one. Do not deduct secured claims the amount of any secured claims of the amount of the amount of any secured claims of the amount	claims on Schedule L s Secured by Property
Make: Nissan Who has an interest in the property? Check one. Model: Rogue Debtor 1 only Current value of the Curr	claims on Schedule to s Secured by Property Current value of t
Make: Nissan Who has an interest in the property? Check one. Model: Rogue Debtor 1 only Creditors Who Have Claims Stream Carrier Stream Control on the amount of any secured claims Stream Creditors Who Have Claims Stream Control on the Approximate mileage: Debtor 1 and Debtor 2 only Approximate mileage: Approximate mileage: Approximate mileage: Approximate Make: Nissan Model: Do not deduct secured claims the amount of any secured claims Stream Control on the Approximate mileage: Do not deduct secured claims the amount of any secured claims Stream Control on the Approximate Model: Debtor 1 only Current value of the Control on the Approximate mileage: Do not deduct secured claims Stream Control on the Approximate Model: Debtor 1 only Current value of the Control on the Approximate mileage: Debtor 1 and Debtor 2 only Proximate mileage: Debtor 1 and Debtor 2 only Proximate mileage: Do not deduct secured claims Stream Control on the Approximate mileage: Debtor 1 only Current value of the Control on the Approximate mileage: Debtor 1 and Debtor 2 only Proximate mileage:	claims on Schedule L s Secured by Property
Make: Nissan Who has an interest in the property? Check one. Model: Rogue Debtor 1 only Current value of the Curr	claims on Schedule to s Secured by Property Current value of t

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 14 of 88

ebtor 1	Sabrina First Name M	liddle Name Last Nam	ne		
					general section
3.3.	Make:	Hyundai	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Madel:	Elantra	Debtor 1 only	Creditors Who Have Clain	
	Year:		☑ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage	e:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			7.004.00	7 004 00
	kmhdh4ae4gu6	in8730	Check if this is community property (see	\$7,604.00	\$7,604.00
	i i i i i i i i i i i i i i i i i i i	,00,00	instructions)		
			Who has an interest in the property? Check one.		
3.4.	Make:		_	Do not deduct secured cla the amount of any secure	
	Model:		Debtor 1 only Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:		Debtor 1 and Debtor 2 only	Current value of the	Current value of th
	Approximate mileag	e:	At least one of the debtors and another	entire property?	portion you own?
	Other information:				
			☐ Check if this is community property (see	\$	\$
			instructions)		
Exan	nples: Boats, trailers, lo		ther recreational vehicles, other vehicles, and accest craft, fishing vessels, snowmobiles, motorcycle accesso		
Exan	nples: Boats, trailers, lo		craft, fishing vessels, snowmobiles, motorcycle accesso	ories	
Exan	nples: Boats, trailers, lo 'es		who has an interest in the property? Check one.		
Exan	mples: Boats, trailers, lo les Make:	motors, personal water	who has an interest in the property? Check one. Debtor 1 only	ories Do not deduct secured cla	d claims on Schedule D:
Exan	mples: Boats, trailers, lo les Make:	motors, personal water	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D. ns Secured by Property.
Exan	nples: Boats, trailers, lo /es Make: Model:	motors, personal water	who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secure	d claims on Schedule D. ns Secured by Property.
Exan	mples: Boats, trailers, lo res Make: Model: Year:	motors, personal water	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
Exan	mples: Boats, trailers, lo res Make: Model: Year:	motors, personal water	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
Exam I N Y 4.1.	mples: Boats, trailers, lo res Make: Model: Year:	motors, personal water	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
Exam If you	mples: Boats, trailers, lo lo les Make: Model: Year: Other information:	motors, personal water	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$
Exam I N Y 4.1.	mples: Boats, trailers, lo res Make: Model: Year: Other information: Jown or have more the Make:	motors, personal water	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$
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Exam If you	Make: Model: Year: Own or have more the Make: Model: Year:	motors, personal water	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$ sims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of th
Exam If you	Make: Model: Year: Own or have more the Make: Model: Year:	motors, personal water	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule Dins Secured by Property. Current value of the portion you own? \$ sims or exemptions. Put d claims on Schedule Dins Secured by Property. Current value of the portion you own?
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Exam If you	Make: Model: Year: Own or have more the Make: Model: Year:	motors, personal water	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ sims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
Exam If you 4.1.	Make: Model: Year: Other information: Make: Model: Year: Other information:	nan one, list here:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule Dins Secured by Property. Current value of the portion you own? \$ sims or exemptions. Put d claims on Schedule Dins Secured by Property. Current value of the portion you own?

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 15 of 88

Debtor 1

Sabrina First Name Danielle

Last Name

Middle Name

Victory

Case number (if known)______

Part 3: Describe Your Personal and Household Items	
Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	• • •
Examples: Major appliances, furniture, linens, china, kitchenware	
2 No	
Yes. Describe	5
	a
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
☑ No	Anne Lawry
Yes. Describe	\$
	Ψ
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
☑ No ☐ Yes. Describe	
Yes. Describe	\$
A Finite-rout for another and helicine	Limited in a 2
 Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments 	
No No	f 1 - Nother through
Yes. Describe	\$
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe	
₩ 165. Destribe	\$
11, Clothes	CO. S. Daspoule
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
Yes. Describe Wearing Apparel	\$100.00
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold. silver	
☑ No ☐ Yes. Describe	\$
13. Non-farm animals Examples: Dogs, cats, birds, horses	
☑ No	
☐ Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	
₩ No	· · · · · · · · · · · · · · · · · · ·
Yes. Give specific	\$
information	
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	s <u>100.00</u>

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 16 of 88

Victory Sabrina Danielle Debtor 1 Case number (if known) Part 4: Describe Your Financial Assets Current value of the Do you own or have any legal or equitable Interest in any of the following? portion you own? Do not deduct secured claims ог exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ No ☐ Yes...... Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No ☑ Yes..... Institution name: 750.00 Wells Fargo Acc#2077 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts 2 No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Name of entity: % of ownership: Yes. Give specific 0% information about 0% them..... %

0%

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 17 of 88

ebtor 1	Sabrina	Danielle	Victory	Case number (if known)	
	First Name	Middle Name La	st Name		
Govern	ment and corpo	orate bonds and othe	r negotiable and non-negot	iable instruments	
			s, cashiers' checks, promisso not transfer to someone by sig		
	<i>y</i> - · · · · · · · · · · · · · · · · · ·			g.m.g.t. server.ng	
No Dives	. Give specific	Issuer name:			
info	rmation about				o
ther	n				\$
		-			\$ \$
					V
Retiren	nent or pension	accounts			
	· -		1(k), 403(b), thrift savings acc	counts, or other pension or profit-sharing plans	
⊿ No					
	. List each ount separately.	Type of account:	Institution name:		
acc	ови зерагаюту.	•	Fidelity		\$ 742.00
		401(k) or similar plan:	1 idolity		φ1 <u>42.00</u>
		Pension plan:			\$
		IRA:			\$
		Retirement account.			\$
		Keogh:			\$
		Additional account:			\$
		Additional account:			\$
		, laditional account.			Ψ
Your sh Example compar		deposits you have ma	• •	service or use from a company gas, water), telecommunications	
☑ No					
☐ Yes	,	Ins	titution name or individual:		
		Electric:	<u> </u>		\$
		Gas:			\$
		Heating oil:			\$
		Security deposit on rent	tal unit:		\$
		Prepaid rent:			\$
		Telephone:			\$
		Water:			\$
		Rented furniture:			\$
		Other:			\$
Annuiti	es (A contract for	r a periodic payment o	f money to you, either for life	or for a number of years)	
Ø No					
☐ Yes		Issuer name and desc	ription:		
					\$
					\$
					\$

Official Form 106A/B

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 18 of 88

Debtor 1	Sabrina	Danielle	Victory	Case number (# known)	
	First Name Middle	Name Last Name	— —	·	
	s in an education IR. C. §§ 530(b)(1), 529A		qualified ABLE progran	n, or under a qualified state tuition program.	
Z0 0.3.	C. 99 000(b)(1), 029A	(D), and 529(D)(1).			
		1		T	- 1
100		institution name and	description. Separately f	file the records of any interests.11 U.S.C. § 521(C);
					\$
					\$
					\$
					· · · · · · · · · · · · · · · · · · ·
Trusts,	equitable or future in	nterests in property (other than anything list	ed in line 1), and rights or powers	
exercis	able for your benefit				
No 🔽		,		and the second s	15
	. Give specific				
infol	rmation about them		and the second s		\$
Patonto	s convrights tradem	arks, trade socrete	and other intellectual pr	onerty	
			eds from royalties and lice		
☑ No			-	- 0	
_	. Give specific	:			
	rmation about them				5
			and the second of the second of the second of		2
		ther general intangil			
•	es: Building permits, e	exclusive licenses, cod	perative association hold	ings, liquor licenses, professional licenses	
🛭 No		parente	and the second of a first the second control of the second control		matt
	. Give specific				¢
1/1101	rmation about them	<u> </u>			φ
0000 01	property owed to you	12			Current value of the
oney or p	property owed to you				portion you own?
					Do not deduct secured claims or exemptions.
T					
	unds owed to you				
☑ No	. Give specific informa	4:			
₩ Yes	about them, including			Federal:	\$
	you already filed the			State:	\$
	and the tax years,	******************		Local:	\$
				and the second second	
Family	support				
_		sum alimony, spousal	support, child support, ma	aintenance, divorce settlement, property settleme	ent
🗹 No		Sections and control of the Park	torrespond and the second states and the second states and the second second second second second second second	COLUMN TO THE	
Yes	. Give specific informa	ation		Alimena	•
		† †		Alimony:	\$
				Maintenance:	\$
		i i		Support:	\$
				Divorce settlement:	\$
		ļ		Property settlement:	\$
	imounts someone ov				
Exampl			nents, disability benefits, s ou made to someone else	sick pay, vacation pay, workers' compensation,	
☑ No	Social Security De	пенка, инрави тоана ус	ig made to someone else		
	. Give specific informa	tion	Line of the second second second second	A STATE OF THE STA	
u res	эте эрвана инаста	AUGH			•

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 19 of 88

Debtor 1	Sabrina First Name	Danie Middle Name	lle Victory	Case number (if known)	
	· ···ocryaline	Most Hallo			
31 Interes	ts in insurance	e nolicies			
		•	ce; health savings acc	ount (HSA); credit, homeowner's, or renter's insurance	· .
☐ No					
∠ Yes		urance company and list its value	Сотрапу пате:	Beneficiary:	Surrender or refund value:
			State Farm		\$
					\$
					\$
If you a	re the beneficia		from someone who h xpect proceeds from a	las died life insurance policy, or are currently entitled to receive	
🔲 Yes	s. Give specific	information			\$
			s, insurance claims, or	•	
	s. Describe each	h claim			
				Сомунительности учеровать национальности учествина не общение обще	<u> </u>
34. Other of to set of No.	ontingent and off claims	unliquidated clain		cluding counterclaims of the debtor and rights	
🔲 Yes	. Describe eacl	h claim	C TO TO THE CONTRACT OF THE CO	T NA A SA	:
		:		The second section of the second section is a second section of the second section sec	
35. Any tina	anciai assets y	you did not aiready 	list		
	. Give specific	information			
				The state of the s	»
36. Add the	e dollar value (of all of your entrie	s from Part 4, includi	пg any entries for pages you have attached	4.400.00
for Pari	t 4. Write that i	number here		→	\$1,492.00
Part 5:	Describe .	Any Business-l —	Related Property	You Own or Have an Interest In. List any	real estate in Part 1.
37. Do you	own or have a	nny legal or equital	le interest in any bus	siness-related property?	
	Go to Part 6.				3
☐ Yes	. Go to line 38.				
					Current value of the portion you own? Do not deduct secured claims
00 8					or exemptions.
38. Accoun	its receivable	or commissions yo	u aiready earned		
	. Describe		VALUE - VALUE		
	1				<u></u>
		nishings, and supp		rs, fax machines, rugs, telephones, desks, chairs, electronic device	
Example ☐ No	o pusiness-relat	eu computers, sonware	, moderns, printers, copie	rs, rax macrimes, rugs, terepriories, dasks, chairs, electronic device	3
	Describe	•			 \$
				·	

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 20 of 88

Debtor 1	Sabrina	Danie		Victory	Case number (if known)	
	First Name	Middle Name	Last Name		-	
40. Machine	ery, fixtures, e	quipment, supplie	s you use	e in business, and	d tools of your trade	:
☐ No						
	. Describe					
					The second secon	
41. Inventor	гу					
	. Describe				THE CONTRACT OF TAXABLE AND THE CONTRACT OF TAXABLE AND THE CONTRACT OF TAXABLE AND TAXABL	
— 103.	. Describe				and the second s	, J
	s in partnersh	ips or joint venture	98			
☐ No	B					
u res	. Describe	Name of entity:			% of ownership:	
					%	\$
					%	\$
					%	\$
42 Custom	orlicta mailin	g lists, or other co	mnilatio			
43. Custom	er nsis, mann	g lists, or other co	inpliatioi	15		
·= ·	. Do your lists	include personally	/ identifia	ıble information (as defined in 11 U.S.C. § 101(41A))?	
	□ No				•	
	☐ Yes. Desc	ribe			and the state of t	
						\$
44 0-11 614					A AMARINE STANDARD CONTROL OF THE STANDARD STAND	!
44. Any bus	smess-relateu	property you did r	rot airead	iy iist		
	. Give specific					•
	mation					3
						\$
			···			\$
						\$
						\$
						\$
					ny entries for pages you have attached	\$
for Part	5. Write that r	number nere				
Part 6:		ny Farm- and Co · have an interest i			ted Property You Own or Have an Interest Ir	1.
					· ————————————————————————————————————	
46. Do you	own or have a	ny legal or equitat	ole intere:	st in any farm- or	commercial fishing-related property?	
	Go to Part 7.					
Tes.	Go to line 47.					
						Current value of the
						portion you own? Do not deduct secured claims
						or exemptions.
47. Farm aı						
_ '	es: Livestock, p	oultry, farm-raised t	ish			
□ No						
☐ Yes						- Company
						\$
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	The second secon	

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 21 of 88

Debtor 1	Sabrina_	Danielle	Victory_		Case number (# known)	
	First Name	Middle Name Last Name				
48. Crops	-either growing	or harvested				****
☐ No		e e e e e e e e e e e e e e e e e e e			CONTRACTOR CONTRACTOR AND	3
	es. Give specific : formation.	Nagyanaa				\$
49. Farm 8		oment, implements, machin				
	, 25				подделения по полиции по	
		and the second s	ser II to Aseneses energy (Communications	Anderson is protected to the transfer of parts to the bottle to the contraction of the transfer of the transfe	endendels and 1858 (1. 1857 Apparatus) and 1878 for 2018 and 1878 and 1878 and 1878 and 1878 and 1878 and 1878	\$
50. Farm (and fishing supp	lies, chemicals, and feed				
□ No						
. . Y6	98					\$
61. Anv f a		rcial fishing-related propert			\$\$\$\$\$\frac{1}{2}\$\$\$\lime{1}\$	· · · · · · · · · · · · · · · · · · ·
□ No	>			-		
	es. Give specific formation					\$
		f all of your entries from Pa	rt 6, including a	ny entries for pages	you have attached	\$
for Pa	ırt 6. Write that n	umber here			→	
Part 7:	Describe i	III Property You Own	or Have an I	nterest in That	You Did Not List Above	
-		perty of any kind you did no country club membership	ot already list?			THE STATE OF THE S
☑ No	:		· · · · · · · · · · · · · · · · · · ·		CONTRACTOR DANGER STATE OF AMERICAN MILITARY	o o
	es. Give specific formation					\$
,.						S
	Į.			to determine the control of the	National Commission And Association of the Commission of the Commi	
54. Add th	ne dollar value o	fall of your entries from Pai	t 7. Write that n	umber here	→	\$
	_					
Part 8:	List the To	tals of Each Part of t	his Form			
55. Part 1	: Total real estat	e, line 2				\$
56. Part 2	: Total vehicles,	line 5		\$42,117.00		
57. Part 3	: Total personal	and household items, line 1	5	\$100.00		(
58 Part 4	: Total financial	assets, line 36		\$1,492.00		
59. Part 5	: Total business	related property, line 45		\$		· ·
60. Part 6	: Total farm- and	fishing-related property, lin	ne 52	\$		
61. Part 7	: Total other pro	perty not listed, line 54	+	\$:
62. Total į	personal propert	y. Add lines 56 through 61,		\$43,709.00	Copy personal property total 👈	+\$ 43,709.00
					3	
63. Total (of all property or	Schedule A/B. Add line 55	+ line 62		,	\$43,709.00

Fill in this it	nformation to iden	tify your case:	
Debtor 1	Sabrina	Danielle	Victory
	First Name	Middle Name	Last Name
Debtor 2	Brianna	Elizabeth	Victory
(Spouse, if filing	j) First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the: Middle District of Florid	da
Case number (If known)	-		

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	g fair
Brief description:	2018 Subaru	\$ 20,000.00_	⊿ \$ 20,000.00	Fla. Stat.§222.25;222.25(1); Fla. Const. Art. X § 4(a)(2);
Line from Schedule A/B	3.1		100% of fair market value, up to any applicable statutory limit	
Brief description.	2015 Nissan	s_14,513.00_	☑ \$ 14,513.00	Fla. Stat.§222.25;222.25(1); Fla. Const. Art. X § 4(a)(2);
Line from Schedule A/B:	32_		□ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Hyundai Elantra	\$7,604.00	Ø \$ 7,604.00	Fla. Stat.§222.25;222.25(1); Fla. Const. Art. X § 4(a)(2);
Line from Schedule A/B:	3.3		100% of fair market value, up to any applicable statutory limit	

3.	Are you claiming a homestead exemption of more than \$170,350?
	(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)
	⊠ No
	☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
	21 No
	□ Vac

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 23 of 88

Debtor 1

Sabrina First Name Danielle Last Name Victory

Case number (# known)_____

Part 2:

Additional Page

Middle Name

Brief description of the pro on Schedule A/B that lists t		Current value portion you		Amount of the exemption you claim	Specific laws that allow exemption
		Copy the valu Schedule A/E		Check only one box for each exemption	
Brief Clothes description: 11 Schedule A/B:		\$	100.00	■ 100.00 100% of fair market value, up to any applicable statutory limit	222.25(4) Const. Art. X. § 4(a)(2)
Brief description: Deposits Line from Schedule A/B: 17.1	<u> </u>	\$	<u>750.00</u>	■ \$	222.25(4) Const. Art. X. § 4(a)(2)
Brief description: Line from Schedule A/B: Retirement 21	ent	\$	742.00	▼ \$ 742.00 □ 100% of fair market value, up to any applicable statutory limit	222.25(4) Const. Art. X. § 4(a)(2)
Brief description: Line from 31 Schedule A/B	rance	\$		\$ □ 100% of fair market value, up to any applicable statutory limit	222.25(4) Const. Art. X. § 4(a)(2)
Brief description: Line from Schedule A/B:		\$		☐ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$		\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$		□ \$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$		□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$		□ \$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$		□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$		□ s □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$		\$ 100% of fair market value, up to any applicable statutory limit	

Fili in this in	nformation to ide	ntify your case:		<u>-</u> -						
Debtor 1	Sabrina	Danielle		/ictory						
Debtor 2	First Name Brianna	Middle Name Elízabetk	h	Last Name Victory						
(Spouse, if filing)) First Name Bankruptcy Court for	Middle Name		Last Name						
_		i ille: Middie Disti	not of Fighta		}					
(If known)				· 						if this is an led filing
	= 400	_							G2	9
	Form 106									
Scheo	lule D: C	reditors	Who H	lave Cla	ims Secur	ed b	y Prop	ert	У	12/15
information additional p	i. If more space is pages, write your reditors have clai	needed, copy t name and case ims secured by	the Additional number (if kn your property	Page, fill it out own).	together, both are ed, , number the entries,	and atta	ch it to this	form. (On the top o	
	heck this box and Fill in all of the info		to the court wil	h your other sch	edules. You have лоth	ing etse t	to report on t	his forn	1.	
Part 1: L	ist All Secured	Claims								
for each o		one creditor has	a particular cl	aim, list the othe	the creditor separately r creditors in Part 2. reditor's name.	Do not d	A t of claim leduct the collateral.	Value	n B of collateral upports this	Unsecured
	ai Finance		Describe the p	roperty that sec	ures the claim:	\$	11,636.00	\$	7,604.00	\$_4,032.00
	Talbert Ave	i^	Hyundai Ela	ıntra	A Store (C. 1) The Control of the Co					
Number	Street		As of the date		m is: Check all that apply					
Founta City	in Valley C	A 92708	Contingent Unliquidated Disputed							
Who owes	the debt? Check or		•	Check all that appl	ly.					
Debtor 1	•	ĺ	-	nt you made (such	as mortgage or secured					
Debtor 2	only Land Debtor 2 only	1	car loan) Statutory lie	n (such as tax lien,	mechanic's lien)					
	one of the debtors ar			en from a lawsuit						
	if this claim relates	s to a	Other (included)	ding a right to offse	t)	_				
Date debt v	vas incurred 09/	<u>04/2015</u> 1	Last 4 digits o	f account numbe	er emercija	-T3844	esti statutas é mon es co co-co-co destitutos	388 ~ m () (0 (, 00	287 () (), 2 pills formers (000	CONTRACTOR OF THE STATE OF THE
	3 Auto Finance	<u>; </u>	Describe the p	roperty that sec	ures the claim:	\$ <u>-</u> 2	25,763.00	\$	20,000.00	\$ 5,763.00
PO Bo	x 901003 Street		Subaru Cro							
					m is: Check all that apply					
Fortwo	rth T	X 76101	ContingentUnliquidatedDisputed	I						
Who owes	the debt? Check or	ne.	Nature of lien.	Check all that appl	ly.					
Debtor 1	•	!	_	nt you made (such	as mortgage or secured					
Debtor 2 Debtor 1	only and Debtor 2 only	1	car loan) Statutory lie	n (such as tax lien,	mechanic's lien)					
	one of the debtors ar		Judgment lie	en from a lawsuit	•					
	if this claim relates inity debt		Other (include	ding a right to offse	t)					
commu	•									

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 25 of 88

	Debtor 1	Sabrina	Danielle	Case in	mber (# known)					
		First Name	Middle Name	Last Name						
		Additional Pag	-		Column A Amount of c	75 50	Column I	collateral	1204	ımın C ecured
ı	Part 1:	After listing any by 2.4, and so for	•	age, number them beginning with 2.3, followed	Do not deduct value of collate	the		ports this	port If an	ion
2		an Acceptance	e Co	Describe the property that secures the claim:	 14,54		\$1·	1,513.00		32.00
;	Creditor	s Name Box 660360		2045 Nissaa Parus	***					
	Number			2015 Nissan Rogue						
			TV 75000	As of the date you file, the claim is: Check all that apply	erad (
Ì	Dalla City	<u> </u>	TX 75266 State ZIP Code	☐ Contingent ☐ Unliquidated						
i	,		J. 2712	Disputed						
	_	es the debt? Check	k one.	Nature of lien. Check all that apply.						
	_	or 1 only or 2 only		An agreement you made (such as mortgage or secured car loan)						
:		or 1 and Debtor 2 on	=	Statutory lien (such as tax lien, mechanic's lien)						
	☑ At lea	ast one of the debtor	s and another	Judgment lien from a lawsuit Other (including a right to offset)						
		ck if this claim rela munity debt	ates to a		_					
	Date det	ot was incurred _1	10/08/2014	Last 4 digits of account number						
	***********	artimosperetanglitti i hirini itti asaaa	values (1989) II II a (Autoritation (III) autoritation (III)	Describe the property that secures the claim:	\$	S: III MCA 49 49 49 7 9 79	***************************************	ZSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS	*	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Creditor'	s Name					*		T	
:	Number	Street								
-				As of the date you file, the claim is: Check all that apply	<i>t</i> .					
				☐ Contingent☐ Unliquidated☐						
	City		State ZIP Code	Disputed						
	Who ow	es the debt? Check	k one.	Nature of lien. Check all that apply.						
	Debte	*		☐ An agreement you made (such as mortgage or secured						
		or 2 only or 1 and Debtor 2 onl	ls.	car toan) Statutory lien (such as tax lien, mechanic's lien)						
	_	ast one of the debtors	•	Judgment lien from a lawsuit						
:		ck if this claim rela munity debt	ates to a	Other (including a right to offset)	_					
i	Date det	ot was incurred		Last 4 digits of account number						į
	COSCI COMMANDO	recoverage of the control of the con-	CHRISTOCOMO COSTO	Describe the property that secures the claim:	\$	orn163631.www	\$	**************************************	\$	Lentert 12 45 Y 5 X 5 Z 5 Z 5 Z 5 Z 5 Z 5 Z 5 Z 5 Z 5 Z
	Creditor	s Name			_	_		_		
1	Number	Street								
1				As of the date you file, the claim is: Check all that apply						
1				Contingent						
:	City		State ZIP Code	☐ Unliquidated ☐ Disputed						į
:	Who ow	es the debt? Check	k one.	Nature of lien. Check all that apply.						
	Debte	=		An agreement you made (such as mortgage or secured						
: f	Debte	or 2 only or 1 and Debtor 2 onl	ılv	car loan) Statutory lien (such as tax lien, mechanic's lien)						
:		ast one of the debtor	•	☐ Judgment lien from a lawsuit						
		ck if this claim rela munity debt	ates to a	Other (including a right to offset)	-					
		ot was incurred _		Last 4 digits of account number						
:	А	dd the dollar valu	ue of your entries	in Column A on this page. Write that number here	: _{\$} 14,54	5.00				
				add the dollar value totals from all pages.	s 51,94	4.00				
	VV	rite that number	uete:		<u> </u>					

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 26 of 88

Debto	r 1	Sabrina First Name	Danielle	st Name	Victory	Case number (if known)
Pa	rt 2:	Ī	to Be Notified fo		That You Airead	y Listed
agi yo	ency is t u have n	rying to collect nore than one c	from you for a debt y	ou owe to debts tha	o someone else, list t it you listed in Part 1,	r a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
						On which line in Part 1 did you enter the creditor?
	Name					Last 4 digits of account number
	Number	Street				<u> </u>
	City			State	ZIP Code	and the state of t
	1					On which line in Part 1 did you enter the creditor?
	Name		<u></u>	<u>-</u>		Last 4 digits of account number
	Number	Street				_
	City			State	ZIP Code	-
		turn the way of	e saar aan waa aa aan ah		dank	On which line in Part 1 did you enter the creditor?
<u> </u>	Name					Last 4 digits of account number
	Number	Street				_
		· · · · · · · · · · · · · · · · · · ·				-
	City	· · · · · · · · · · · · · · · · · · ·		State	ZIP Code	_
		** .	and the second second		e de la coloni e marco como	On which line in Part 1 did you enter the creditor?
	Name					Last 4 digits of account number
	Number	Street				
						_
	City			State	ZIP Code	_
			and the second of the second o	-beneneney	TO ANNOUNCE CONTRACTOR OF COMMUNICATIONS	On which line in Part 1 did you enter the creditor?
	Name				<u></u>	Last 4 digits of account number
	Number	Street				_
 ,	City			State	ZIP Code	
						On which line in Part 1 did you enter the creditor?
	Name					Last 4 digits of account number
	Number	Street				_
						_
	City			State	ZIP Code	

Fill	in this information to identify your case:			
Dale	Sabrina Danielle	Victory		
Dept	First Name Middle Name	Last Name		
	otor 2 Brianna Elizabeth puse, if filing) First Name Middle Name	Victory Last Name		
Unite	ted States Bankruptcy Court for the: Middle District o	f Florida		
	· ,	1		Check if this is an
	e number nown)			amended filing
∩ffi	icial Form 106E/F			
	chedule E/F: Creditors \	Nho Have Unescure	ad Claime	12/15
List to A/B: i credit needs	s complete and accurate as possible. Use Pa the other party to any executory contracts or Property (Official Form 106A/B) and on Sche itors with partially secured claims that are lis led, copy the Part you need, fill it out, number additional pages, write your name and case n	unexpired leases that could result in a dule G: Executory Contracts and Unex ted in Schedule D: Creditors Who Havet the entries in the boxes on the left. A umber (if known).	i claim. Also list executory pired Leases (Official Forr e Claims Secured by Propo	r contracts on Schedule n 106G). Do not include any erty. If more space is
	——————————————————————————————————————		.	
-	Do any creditors have priority unsecured clair 1 No. Go to Part 2.	ns against you?		
-	Yes.			
ea no	.ist all of your priority unsecured claims. If a ach claim listed, identify what type of claim it is. conpriority amounts. As much as possible, list the insecured claims, fill out the Continuation Page of	If a claim has both priority and nonpriority claims in alphabetical order according to	e amouπts, list that claim here the creditor's name. If you I	e and show both priority and nave more than two priority
(F	For an explanation of each type of claim, see the	instructions for this form in the instructio	0.000000	Alegeria de la
			Total clair	n Priority Nonpriority amount amount
2.1		to the state of th	¢.	¢ \$
	Priority Creditor's Name	Last 4 digits of account number	\$	Ψ
i	Number Street	When was the debt incurred?		
		- As of the date you file, the claim is: 0	Check all that apply.	
		, ,	11.7	
	7.7	- 🗖 Contingent		
	City State ZIP Code	Contingent Unfiguidated		
	Who incurred the debt? Check one.			
	Who incurred the debt? Check one. Debtor 1 only	☐ Unliquidated ☐ Disputed		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim	n:	
	Who incurred the debt? Check one. Debtor 1 only	 ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim ☐ Domestic support obligations 		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	 ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim ☐ Domestic support obligations ☐ Taxes and certain other debts you ow 	e the government	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	 ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim ☐ Domestic support obligations 	e the government	
	Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	 ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim ☐ Domestic support obligations ☐ Taxes and certain other debts you ow ☐ Claims for death or personal injury wh 	e the government ille you were	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	 ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim ☐ Domestic support obligations ☐ Taxes and certain other debts you ow ☐ Claims for death or personal injury whintoxicated ☐ Other. Specify	e the government ille you were 	
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2.2	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Unliquidated □ Disputed Type of PRIORITY unsecured claim □ Domestic support obligations □ Taxes and certain other debts you ow □ Claims for death or personal injury whintoxicated □ Other. Specify □ Last 4 digits of account number □ When was the debt incurred? □ As of the date you file, the claim is: Claim contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim	e the government iile you were \$ Check all that apply	
2.2	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Unliquidated □ Disputed Type of PRIORITY unsecured claim □ Domestic support obligations □ Taxes and certain other debts you ow □ Claims for death or personal injury whintoxicated □ Other. Specify □ Last 4 digits of account number □ When was the debt incurred? □ Contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim □ Domestic support obligations □ Taxes and certain other debts you ow □ Claims for death or personal injury wh	e the government tille you were \$ Check all that apply n: the government	
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Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 28 of 88

Victory Sabrina Danielle Debtor 1 Case number (if known) Part 1: Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount Last 4 digits of account number ____ ___ Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated ■ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify Is the claim subject to offset? ■ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government. At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other, Specify Is the claim subject to offset? ☐ No 🔲 Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another ☐ Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other. Specify _ Is the claim subject to offset? ☐ Nø 🗅 Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 29 of 88

Sabrina Victory Debtor 1 Case number (if known) First Name Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? oxdity No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Ascend Federal Credi Last 4 digits of account number 0 3 0 7 11,237.06 Nonpriority Creditor's Name 08/29/2016 When was the debt incurred? 550 WM Northern Blvd Number Street TN Tullahoma 37388 As of the date you file, the claim is: Check all that apply. State ZIP Code ☐ Contingent Who incurred the debt? Check one Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ■ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts **Ø** No ☑ Other, Specify
_ ☐ Yes 769.00 ATT Mobility Last 4 digits of account number 09/01/2018 Nonpriority Creditor's Name When was the debt incurred? 1025 Lenox Park Blvd NE. Number As of the date you file, the claim is: Check all that apply. 30319 Atlanta GΑ City ZIP Code Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only igsim At least one of the debtors and another □ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ ☑ No Yes Austin Peay Last 4 digits of account number 2 - 1 - 3 - 72,544.00 Nonpriority Creditor's Name When was the debt incurred? 601 College St TN 37044 Clarksville As of the date you file, the claim is: Check all that apply. ZIP Code State Contingent Who incurred the debt? Check one. ☐ Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ☑ No

Yes

Other. Specify _____

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 30 of 88

Sabrina Danielle Victory Debtor 1 Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.4 Last 4 digits of account number Barclays Bank Delawa s 2,504.00 Nonpriority Creditor's Name 06/23/2016 When was the debt incurred? PO Box 8803 Number Street As of the date you file, the claim is: Check all that apply. Wilmington DΕ 19899 City State ZIP Code ☐ Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims. Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other. Specify_ ₩ No Yes 4.5 Last 4 digits of account number 5 2 7 5 872.00 Capital One NA Nonpriority Creditor's Name 06/21/2018 When was the debt incurred? PO Box 85015 Number As of the date you file, the claim is: Check all that apply. VA 23285 Richmond State ZIP Code Contingent Unliquidated Who incurred the debt? Check one ■ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other. Specify_ ₩ No ☐ Yes s 1,377.00 4.6 Last 4 digits of account number ___ __ __ __ Capital One Bank USA Nonpriority Creditor's Name 10/08/2017 When was the debt incurred? PO Box 30285 Number As of the date you file, the claim is: Check all that apply. UT 84130 Salt Lake City Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other Specify Credit cards □ No ☑ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 31 of 88

Debtor 1

Sabrina First Name

Danielle

Victory

Case number (if known)___

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Last Name

i nsung any enthes on this p	age, number ther	n negiiiiing wid	h 4.4, followed by 4.5, and so forth.	Total clair
Capital One Northland	Group		Last 4 digits of account number	_{\$_} 922.
Nonpriority Creditor's Name P.O.Box 390846			When was the debt incurred? 08/31/2013	
Number Street Minneapolis	MN	55439	As of the date you file, the claim is: Check all that apply.	
City	Stale	ZIP Code	Contingent	
Who incurred the debt? Check	cone		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and	d		☐ Student loans	
_			 Obligations arising out of a separation agreement or divorged you did not report as priority claims 	e that
☐ Check if this claim is for a	•		Debts to pension or profit-sharing plans, and other similar	debts
Is the claim subject to offset? No	•		☑ Other. Specify	
Yes				
Chula Vista Emergency Nonpriority Creditor's Name	Room Phy		Last 4 digits of account number 7 9 8 7	s3 <u>29.</u>
P.O. BOX 1698			When was the debt incurred?	
Number Street			 As of the date you file, the claim is: Check all that apply. 	
Arcadia city	CA State	91077 ZIP Code	Contingent	
Sity	orale.	2 0000	Unliquidated	
Who incurred the debt? Check	cone.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and	d another		Obligations arising out of a separation agreement or divorce	e that
Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?	1		☐ Debts to pension or profit-sharing plans, and other similar ☐ Other. Specify	debts
☑ No □ Yes				
Chula Vista		an Committee and American Amer	Last 4 digits of account number 6 6 7 0	\$ <u>1,346</u> .
Nonpriority Creditor's Name		<u> </u>	Miles and Alexander Alexander 10	
50420			When was the debt incurred?	
Number Street Los Angeles	CA	90074	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one		Unliquidated	
Debtor 1 only	CONTO.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	d another		Obligations arising out of a separation agreement or divorce	e that
Check if this claim is for a	community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	debts
Is the claim subject to offset?	•		Other. Specify	
₩ No			· · · · · · · · · · · · · · · · · · ·	

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 32 of 88

Sabrina Danielle Victory Debtor 1 Case number (if known) First Name Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4 🚹 Last 4 digits of account number Citicards CBNA 778.00 Nonprority Creditor's Name 08/31/2013 When was the debt incurred? 701E 60th St N Streel Number As of the date you file, the claim is: Check all that apply. SD 57104 Sioux Falls State ZIP Code Contingent ☐ Unliquidated Who incurred the debt? Check one. □ Disputed ☑ Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? M No ☐ Yes 543.00 Last 4 digits of account number ___ __ __ Comenity Bank Nonpriority Creditor's Name 04/28/2017 When was the debt incurred? 2795 East Cottonwood Parkway Ste 100 As of the date you file, the claim is: Check all that apply. Salt Lake City UT 84092 ZIP Code ☐ Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only ☑ Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other. Specify_ **☑** No ☐ Yes 4.1 403.21 Last 4 digits of account number Credit One Bank Nonpriority Creditor's Name 06/18/2018 When was the debt incurred? Po Box 98872 Number Street As of the date you file, the claim is: Check all that apply. Las Vegas NV 89193 State ZIP Code ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other, Specify. ☑ No. Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 33 of 88

Sabrina Danjelle Victory Debtor 1 Case number (it known) First Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4 Last 4 digits of account number 23.83 Crossroads urgent care, PLLC Nonpriority Creditor's Name 06/18/2018 When was the debt incurred? 1690 Fort Campbell Blvd As of the date you file, the claim is: Check all that apply. Clarksville TN 37042 ZIP Code City State Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? ☑ Other. Specify_ **☑** No Yes 44 50.00 Last 4 digits of account number ___ __ __ Cumberland Pathology Associates, Nonpriority Creditor's Name 06/18/2018 When was the debt incurred? 651 Dunlop Lane Number Street As of the date you file, the claim is: Check all that apply. Clarksville TN 37043 ZIP Code Contingent State ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? ☑ Other, Specify_ **☑** No 🔲 Yes 4.4 s 1,801.00 Last 4 digits of account number Dept of ED/Navient Nonpriority Creditor's Name 09/02/2016 When was the debt incurred? PO Box 9655 As of the date you file, the claim is: Check all that apply. PA 18773 Wilkes-Barre State ZIP Code ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only 2 Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ **₫** № ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 34 of 88

Debtor 1

Sabrina

Danielle

Victory

Middle Name

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Last Name

er listing any entries on this p	page, number them be	ginning with 4.	4, followed by 4.5, and so forth.	Total cla
Dept of ED/Navient			Last 4 digits of account number	s 3,513.0
Nonpriority Creditor's Name PO Box 9655			When was the debt incurred? 11/05/2013	
Number Stree: Wilkes-Barre	PA 1	18773	As of the date you file, the claim is: Check all that apply.	
City		Code	Contingent	
Who incurred the debt? Chec	k one.		☐ Unliquidated☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors an	-d -aathay		☑ Student loans	
At least one of the debtors and another Check if this claim is for a community dabt			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset? ☑ No ☐ Yes	?		Other, Specify	
Dept of ED/Navient	ABA TIBBITIBBBAAAAAAAAAAAAAAAAAAAAAAAAAA	> rg g h g 1 1 1 1 1 1 43 43 43 43 48 48 48 48 48 48 48 48 48 48 48 48 48	Last 4 digits of account number	<u>\$ 4,161</u>
Nonpriority Creditor's Name			When was the debt incurred? 10/17/2008	
PO Box 9655			When was the debt incurred? 10/17/2008	
Number Street	PA 1	8773	As of the date you file, the claim is: Check all that apply.	
Wilkes-Barre		0 Code	☐ Contingent	
=:4	Cially Lir		Unliquidated	
Who incurred the debt? Check	k one.		Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☑ Student loans	
At least one of the debtors an	a another		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt			you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify	
☑ No				
Yes				
Dept of ED/Navient	www.dorae.10000.00 Salahyddinian neardinian i'w cocce dolaeth	Additional Interpretation of the second of t	Last 4 digits of account number	_{\$} 10,58
Nonpriority Creditor's Name			40/47/0000	
PO Box 9655			When was the debt incurred? 10/17/2008	
Number Street Wilkes-Barre	PA 1	8773	As of the date you file, the claim is: Check all that apply.	
City		Code	☐ Contingent	
Miles increased the delta of	S		Unliquidated	
Who incurred the debt? Check	k une.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONDBIODITY	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors an	id another		☑ Student loans	
_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt			Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	?		Other. Specify	
☑ No				
☐ Yes				

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 35 of 88

Danielle Victory Sabrina Debtor 1 Case number (if known) Your NONPRIORITY Unsecured Claims — Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Table Lagran 147 44 Last 4 digits of account number s 1,950.00 Dept of ED/Navient Nonpriority Creditor's Name 01/26/2011 When was the debt incurred? PO Box 9655 Number Street As of the date you file, the claim is: Check all that apply. Wilkes-Barre PΑ 18773 State ZIP Code Contingent ☐ Unliquidated Who incurred the debt? Check one. □ Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ☑ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify___ ☑ No Yes \$ 4,343.00 Last 4 digits of account number Dept of ED/Navient Nonpriority Creditor's Name 01/26/2011 When was the debt incurred? PO Box 9655 Number As of the date you file, the claim is: Check all that apply. Wilkes-Barre PA 18773 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 anly Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ **52**1 No ☐ Yes s 3,778.00 4 Last 4 digits of account number ___ __ ___ Dept of ED/Navient Nonpriority Creditor's Name 01/08/2013 When was the debt incurred? PO Box 9655 Number Street As of the date you file, the claim is: Check all that apply. Wilkes-Barre PA 18773 Contingent ■ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Official Form 106E/F

☑ No ☐ Yes

☐ Check if this claim is for a community debt

Is the claim subject to offset?

Other, Specify_

Debts to pension or profit-sharing plans, and other similar debts

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 36 of 88

Victory

Danielle

Sabrina

Debtor 1

Case number (it known) Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4 🖥 Last 4 digits of account number s 8,914.00 Dept of ED/Navient Nonpriority Creditor's Name 01/08/2013 When was the debt incurred? PO Box 9655 Mumber Street As of the date you file, the claim is: Check all that apply. Wilkes-Barre PA 18773 State ZIP Code Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 anly Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify__ **∑**Í No ☐ Yes s 3,307.00 Last 4 digits of account number Dept of ED/Navient Nonpriority Creditor's Name 09/02/2016 When was the debt incurred? PO Box 9655 As of the date you file, the claim is: Check all that apply. PΑ Wilkes-Barre 18773 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 anly Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ ✓ No. Yes 110.00 43 Last 4 digits of account number ___ __ __ Dept of Electricity Nonpriority Creditor's Name 08/22/2018 When was the debt incurred? 2021 Wilma Rudolph Blvd Number Street As of the date you file, the claim is: Check all that apply. ΤN 37040 Clarksville State ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other. Specify_ ☑ No ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 37 of 88

Sabrina Danielle Victory Debtor 1 Case number (if known)_ First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4 🔒 Last 4 digits of account number 48.00 Emer Phys Svcs NY PC Nonpriority Creditor's Name 07/21/2018 When was the debt incurred? 1656 Champlin Ave Number Street As of the date you file, the claim is: Check all that apply NY 13502 Utica City State ZIP Cade Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ **⊠** No ☐ Yes 4 651.00 Last 4 digits of account number FC Emergency Physicans Nonpriority Creditor's Name 02/05/2016 When was the debt incurred? 17240 Cortez Blvd Number Street As of the date you file, the claim is: Check all that apply. Brooksville 34601 FL ZIP Code Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? ☑ Other. Specify____ **☑** No Yes 4.3 493.00 Last 4 digits of account number First National Credi Nonpriority Creditor's Name 05/20/2016 When was the debt incurred? 500 E 60th St N Number Street As of the date you file, the claim is: Check all that apply. SD Sioux Falls 57104 Contingent State ZiP Code Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans \square At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other, Specify Credit cards M No ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 38 of 88

Danielle Sabrina Victory Debtor 1 Case number (niknown) First Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4 Last 4 digits of account number 610.00 First Premier Nonpriority Creditor's Name 10/27/2018 When was the debt incurred? 3820 N Louise Ave Number Streel As of the date you file, the claim is: Check all that apply. Síoux Falls SD 57107 State ZIP Code Contingent ☐ Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ ₩ No ☐ Yes 601.00 Last 4 digits of account number ___ __ __ First Svgs-BK Blaze Nonpriority Creditor's Name 06/01/2016 When was the debt incurred? PO Box 5065 Number Stree: As of the date you file, the claim is: Check all that apply. Sioux Falls SD 57117 ZIP Code Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other Specify Credit card ☑ No Yes s 3,277.41 4.3 Last 4 digits of account number _1 _7 _2 4 Kay Jewelers Nonpriority Creditor's Name When was the debt incurred? PO Box 4485 Number Street As of the date you file, the claim is: Check all that apply. OR 97076 Beaverton State ZIP Code Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify Credit card ☑ No Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 39 of 88

Sabrina Danielle Victory Debtor 1 Case number (#known) First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 42 Last 4 digits of account number 9 8 2 3 242.60 Medical revenue service Nonpriority Creditor's Name When was the debt incurred? P.O. Box 1940 Number As of the date you file, the claim is: Check all that apply. FΙ 32902 Melbourne ZIP Code City Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other. Specify_ ✓ No ☐ Yes 4 Last 4 digits of account number 0 5 0 0 s 60.76 MidState Skin Institute Deerwood Nonpriority Creditor's Name When was the debt incurred? 1630 Se 18th St Bldg 400 Number As of the date you file, the claim is: Check all that apply. FL 34471 Ocala State Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only ☑ Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other, Specify_ **☑** No Yes s 2,870.96 Last 4 digits of account number Navy Federal Credit Union Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3100 As of the date you file, the claim is: Check all that apply VΑ Merrifield 22119 State ZIP Code Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify ☑ No

Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 40 of 88

Sabrina Danielle Victory Case number (# known) Debtor 1 First Name Middle Name Last Namo Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 7 9 8 7 487.20 Patient financial services Nonpriority Creditor's Name When was the debt incurred? 10790 ranch Bernardo rd Number As of the date you file, the claim is: Check all that apply. CA San Diego 92127 State ZIP Code City Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other. Specify_ √ No ☐ Yes \$ 1,200.00 Last 4 digits of account number _ Progressive Nonpriority Creditor's Name When was the debt incurred? 256 West Data Dr Number As of the date you file, the claim is: Check all that apply. UT 84020 Draper State ZIP Code ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only ☑ Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other, Specify_ ☑ No ☐ Yes 4.3 788.98 Last 4 digits of account number __ ___ ___ Progressive Nonpriority Creditor's Name When was the debt incurred? 256 West Data Dr Number Street As of the date you file, the claim is: Check all that apply. UT 84020 Draper City State ZIP Code ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed ☑ Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? ☑ Other, Specify_ **☑** No ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 41 of 88

Sabrina Danielle Victory Debtor 1 Case number (# known) First Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 42 Last 4 digits of account number Scripts Billing Correspondence Nonpriority Creditor's Name When was the debt incurred? 10666 North Torrey Pines RD 4S-205 Number As of the date you file, the claim is: Check all that apply. La Jolla CA 92037 City ZIP Code Contingent ■ Unliquidated Who incurred the debt? Check one. ■ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ **☑** No Yes 42 Last 4 digits of account number _ 60.00 Scripps Clinic Nonpriority Creditor's Name 11/30/2018 When was the debt incurred? 3811 Valley Center Dr Number Street As of the date you file, the claim is: Check all that apply. SAn Diego CA 92130 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other, Specify_ M No Yes 4. 717.00 Last 4 digits of account number ____ ___ Scripps Hosiptal Chula Vista Nonpriority Creditor's Name 01/28/2019 When was the debt incurred? 435 H St Street Number As of the date you file, the claim is: Check all that apply. Chula Vista CA 91910 State ZIP Code Contingent ■ Unliquidated Who incurred the debt? Check one ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ 🗹 No ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 42 of 88

Sabrina Danielle Victory Case number (#known), Debtor 1 First Name Middle Name Lost Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 120.00 Sheridan Emergency Physicians Nonpriority Creditor's Name 12/11/2018 When was the debt incurred? 770 West Sunrise Blvd Plantation Number As of the date you file, the claim is: Check all that apply 33322 Florida TΧ ZIP Code City Contingent ■ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? ☑ Other, Specify_ ₩ No ☐ Yes Last 4 digits of account number 2 8 1 7 \$ 4,105.97 Sun coast Nonpriority Creditor's Name When was the debt incurred? 6801 E Hillsborough Ave Number Street As of the date you file, the claim is: Check all that apply FL 33610 Tampa State ZIP Cade Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ ₩ No ☐ Yes \$ 2,304.00 |4**:4**| Last 4 digits of account number _ Syncb/Care Credit Nonpriority Creditor's Name 12/01/2013 When was the debt incurred? C/O P.O. Box 965036 Number Street As of the date you file, the claim is: Check all that apply Orlando FL 32896 City State ZIP Code ☐ Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims. Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? ☑ Other Specify Charge Account ☑ No ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 43 of 88

Case number (if known)

Victory

Danielle

Sabrina

Debtor 1 First Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 795.00 Synchrony Bank Nonpriority Creditor's Name 11/19/2017 When was the debt incurred? 140 Wekiva Springs Rd Number Street As of the date you file, the claim is: Check all that apply. FL 32779 Longwood City State ZIP Code ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other, Specify_ **☑** No ☐ Yes 404.00 Last 4 digits of account number Synchrony Bank Nonpriority Creditor's Name 08/21/2018 When was the debt incurred? 140 Wekiva Springs Rd Number Street As of the date you file, the claim is: Check all that apply. FL Longwood 32779 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one ■ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ ₩ No Yes s 5,421.00 Last 4 digits of account number TFC Credit Corp Nonpriority Creditor's Name 08/16/2018 When was the debt incurred? 520 air park drive Number Street As of the date you file, the claim is: Check all that apply. Tullahoma TN 37388 State Contingent ☐ Unliquidated Who incurred the debt? Check one ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☑ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ ☑ No ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 44 of 88

Sabrina Danielle Victory Debtor 1 Case number (if known) First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 44 Last 4 digits of account number 2 7 5 2 UF Health s 4,000.00 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 16051 Number Street As of the date you file, the claim is: Check all that apply. ME 04243 Lewiston State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ ₩ No ☐ Yes \$ 9,787.00 Last 4 digits of account number US Bank Nonpriority Creditor's Name When was the debt incurred? PO Box 108 Number As of the date you file, the claim is: Check all that apply. St Louis MO 63166 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one ☐ Disputed 🗖 Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☑ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ M No ☐ Yes 4.4 s 14,692.00 Last 4 digits of account number _____ US Dept of Educatio Nonpriority Creditor's Name 09/24/2012 When was the debt incurred? PO Box 7860 Number As of the date you file, the claim is: Check all that apply Madison WI 53704 City State ZIP Code ☐ Contingent ■ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☐ Other, Specify_ ☑ No ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 45 of 88

Danielle Victory Sabrina Debtor 1 Case number (if known) Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4 🚹 Last 4 digits of account number \$ 1,410.00 Valley Emergency Physicians Nonpriority Creditor's Name 10/04/2018 When was the debt incurred? 1990 N Calfornia Blvd#400 Number Street As of the date you file, the claim is: Check all that apply. Walnut Creek CA 94596 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one Disputed ☑ Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify_ ☑ No Yes Last 4 digits of account number 0 3 1 6 50.00 Valley Emergency Physicians Nonpriority Creditor's Name 10/03/2018 When was the debt incurred? 1990 N Calfornia Blvd#400 Number Street As of the date you file, the claim is: Check all that apply. CA 94596 Walnut Creek State ZIP Code ☐ Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? **☑** No T Yes 276.40 4 Last 4 digits of account number 7 _2 3 4 Vanderbilt university medical center Dept Nonpriority Creditor's Name When was the debt incurred? 1171 P.O. Box 121171 Number As of the date you file, the claim is: Check all that apply. 75312 Dallas TX State ZIP Code Contingent ■ Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other. Specify_ 🗹 No ☐ Yes

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 46 of 88 Sabrina Victory Debtor 1 Case number (# known) First Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 45 Last 4 digits of account number Zebit s 1,047.65 Nonpriority Creditor's Name When was the debt incurred? 9530 Towne Center Drive Ste 200 Street As of the date you file, the claim is: Check all that apply. CA 92121 San Diego State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other, Specify_ ₩ No ☐ Yes Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Çity State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other, Specify_ □ No Yes Last 4 digits of account number ___ __ __ Nonpriority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. State ZIP Cade Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim:

☐ No ☐ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

☐ Student loans

Other, Specify_

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

you did not report as priority claims

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 47 of 88

Debtor 1

Sabrina

Danielle

First Name

Victory

Case number (if known)_

Part 3:

Last Name List Others to Be Notified About a Debt That You Already Listed

Credence Resource Manage Name PO Box 2300			On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
			a Fart 2. Of editors with Homphority Drisecured Oran		
Southgate City	M1 State	48195 ZIP Code	Last 4 digits of account number		
LVNV Funding LLC	Julie	217 0000	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line A.E. of (Oberly early D. Brette Condition with Drivity Uncommed Claims		
625 Pilot Road Suite 2/3 Number Street			Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Las Vegas	NV State	89119 ZIP Code	Last 4 digits of account number		
Credit control LLC	6-10-10-10-10-10-10-10-10-10-10-10-10-10-	**STREET, CONTRACTOR (************************************	On which entry in Part 1 or Part 2 did you list the original creditor?		
5757 phantom Dr, STE	330		Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Hazelwood	MO State	63042 ZIP Code	Last 4 digits of account number		
Oty	State	ZIP Code	nner vanar riggi, erretaananistisseere vanagtiisteerenaavargsjisbiinneraanangsisteerevaaviigiss		
Name .			On which entry in Part 1 or Part 2 did you list the original creditor?		
umber Street			Line of (Check one): Q Part 1: Creditors with Priority Unsecured Claims		
			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
City	State	ZIP Code	Last 4 digits of account number		
			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			100 100 100 100 100 100 100 100 100 100		
Number Street	 _		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Out of			Part 2: Creditors with Nonpriority Unsecured Claims		
	·		North Addition of the court according		
City	State	ZIP Code	Last 4 digits of account number		
			On which entry in Part 1 or Part 2 did you list the original creditor?		
Varne			Linn of (Charle and)		
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
_		_	Claims		
			Last 4 digits of account number		
City	State	ZIP Code			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?		
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured		
			Claims		

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 48 of 88

Debtor 1

Sabrina First Name

Danielle

Victory

Case number (if known)_

Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed

Converted Name Claims Part 1 or Part 2 did you list the original creditor?	Midland Funding LLC,		On which entry in Part 1 or Part 2 did you list the original creditor?		
San Diego CA 92 108 Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Credi			Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Case					
San Delgo San De					
On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one):	San Diego	CA 92108	Last 4 digits of account number		
Line of (Check one) Part 1: Creditors with Priority Unsecured Claims	City	State ZIP Code			
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2 creditors with Nonpriority Unsecured Claims Part 3: Creditors with Priority Unsecured Claims Part 3: Creditors with Priorit			On which entry in Part 1 or Part 2 did you list the original creditor?		
Part 2: Creditors with Nonpriority Unsecured Claims Part 2 did you list the original creditor? Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims	Name		Line of (Check and): Dept 1: Creditors with Drievity Hancoward Claims		
Claims C	Number Street	· · · · · · · · · · · · · · · · · · ·			
On which entry in Part 1 or Part 2 did you list the original creditor? Line					
On which entry in Part 1 or Part 2 did you list the original creditor? Line					
Name Name Name Name Name Name Name Name	•				
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Priority Unsecured Claims Part 3: Creditors	v (
Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2 did you list the original creditor?	Name				
Claims Last 4 digits of account number					
Last 4 digits of account number	Number Street		· · ·		
On which entry in Part 1 or Part 2 did you list the original creditor? Line			Gains		
Number Street	City	State ZIP Code	<u> </u>		
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 3: Creditors with Nonpriority Unsecured Claims Part 4: Creditors with Nonpriority Unsecured Claims Part 5: Creditors with Nonpriority Unsecured Claims Part 5: Creditors with Nonpriority Unsecured Claims Part 6: Creditors with Nonpriority Unsecured Claims Part 7: Creditors with Nonpriority Unsecured Claims Part 7: Creditors with Nonpriority Unsecured Claims Part 8: Creditors with Nonpriority Unsecured Claims Part 9: Creditors with Nonpriority Unsecured Claims Part 8: Creditors with Nonpriority Unsecured Claims Part 8: Creditors with Nonpriority Unsecured Claims Part 8: Creditors with Nonpriority Unsecured Part 9: Creditors with Part 9: Creditors wit	-iy				
Part 2: Creditors with Nonpriority Unsecured Claims	Name		On which entry in Part 1 of Part 2 did you list the original creditor?		
Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name Line of (Check one):			Line of (Check one): 🚨 Part 1: Creditors with Priority Unsecured Claims		
City State ZiP Code Last 4 digits of account number	Number Street				
On which entry in Part 1 or Part 2 did you list the original creditor? Claims			Claims		
On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims	City	21D O. 4	Last 4 digits of account number		
Line of {Check one}: Part 1: Creditors with Priority Unsecured Claims			88619% be winder (489888877% n) 000.00% (000% 200008872880098878 20080808666666666666666666666666666666		
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims	Nama		On which entry in Part 1 or Part 2 did you list the original creditor?		
Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one):	Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Claims	Number Street				
On which entry in Part 1 or Part 2 did you list the original creditor? Vame					
On which entry in Part 1 or Part 2 did you list the original creditor? Cine of (Check one):			ast A digits of account number		
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Claims	City	State ZIP Code	Last 4 tights of account number		
Line of (Check one):			On which entry in Part 1 or Part 2 did you list the original creditor?		
Part 2: Creditors with Nonpriority Unsecured Claims	Name		Line of (Check and) [] Bort 4: Orditors with District Description of Old and		
Claims Last 4 digits of account number City State ZIF Code Name On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims	Number Street		_		
On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	2500				
On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			Local Addition of a constant to		
On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims	City	State ZIF Code	- — — — —		
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims	Name				
Number Street Part 2: Creditors with Nonpriority Unsecured Claims			Line of (Ohnek ann) [7] Bort 4: One discuss with Delivative because of Ohne		
Claims	Number Street				

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 49 of 88

Sabrina First Name

Danielle

Victory

Debtor 1

Case number (if known)_

Part 3:

Last Name List Others to Be Notified About a Debt That You Already Listed

			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name Number Street			•		
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim:		
	<u> </u>		Last 4 digits of account number		
City	State	ZIP Code	овет — до торина у у столого полочиние принамене, дин чаров, и полочини принаменения выполнения высти выполнения выполнения выполнения выполнения выполнения в		
SCA Collections			On which entry in Part 1 or Part 2 did you list the original creditor?		
300 East Aelington Blvd	,		Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Greenville City	NC State	27834 ZIP Code	Last 4 digits of account number		
Name			On which entry in Part 1 or Part 2 did you list the original creditor?		
nama			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured		
			Claims		
City	State	ZIP Code	Last 4 digits of account number		
			On which entry in Part 1 or Part 2 did you list the original creditor?		
Varne			Line of (Charles) [7] Barta Carlina with Big in the constitution of China		
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
			Claims		
City	Slate	ZIP Code	Last 4 digits of account number		
		. ·	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Çity	Stale	ZIP Code	Last 4 digits of account number		
		VV3000 # 12022VV3343X(1); 15.1. 42034	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
City	State	ZIP Code	Last 4 digits of account number		
r-nhrife)Communicat (ECLIII) (Espenninhrib oranimathe) (CLIIIII) (Espenanhrib	h, ravas avaesgati ti is debbesseremminins d	Discouling of Marie Barres Anna State Common	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			_		
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
<u> </u>			Part 2: Creditors with Nonpriority Unsecured Claims		
			Last 4 digits of account number		

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 50 of 88

Debtor 1

Sabrina First Name

Danielle

Victory

Last Name

Case number (it known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Credit Bureau System Name 1947 Madison St			On which entry in Part 1 or Part 2 did you list the original creditor?		
			Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured Claim		
Clarksville	TN	37040	Last 4 digits of account number		
City	State	ZIP Code	MONTO TO LIVER WELVINGS CONSESSESSIONS CONSESSESSION OF THE CONSESSION OF THE CONSES		
Vame			On which entry in Part 1 or Part 2 did you list the original creditor?		
			Line of (Check one): Part 1: Greditors with Priority Unsecured Claims		
(umber Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims		
			Ciams		
City	State	ZIP Code	Last 4 digits of account number		
18 () () () () () () () () () () () () ()		AND THE PROPERTY OF THE PROPER	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line of /Check and). Dept 1: Creditors with Driving Lineau and Claims		
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Dity	State	ZIP Code	Last 4 digits of account number		
Oily .	State	Zir Cobe	On which entry in Part 1 or Part 2 did you list the original creditor?		
lame					
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Mounder Street			Part 2: Creditors with Nonpriority Unsecured Claims		
City	State	ZIP Code	Last 4 digits of account number		
		and a supplied	On which entry in Part 1 or Part 2 did you list the original creditor?		
Varne			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 1: Creditors with Phonity Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
			Claims		
			Last 4 digits of account number		
City	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name					
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
			Claims		
2th.	Choise	ZIP Code	Last 4 digits of account number		
City Milliodiddawnnon (2984) ar maraffill (1711, bref ynn am (1842) ab er eres (1722). T	State	21P Cude	On Which easters in Port 4 or Port 2 did you liet the entries conditor?		
Varrie			On which entry in Part 1 or Part 2 did you list the original creditor?		
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
			Part 2: Creditors with Nonpriority Unsecured Claims		
City	State	ZIP Code	Last 4 digits of account number		

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 51 of 88

Debtor 1

Sabrina

Danielle First Name

Last Name

Victory

Case number (# known)_

•		
┎		

List Others to Be Notified About a Debt That You Already Listed

ARS Account Resoluti Name 1643 NW 136th AVe			On which entry in Part 1 or Part 2 did you list the original creditor?		
			Line 4.25 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			☑ Part 2: Creditors with Nonpriority Unsecured Claim		
Sunrise	 FL	33323	Last 4 digits of account number		
City	State	ZIP Code			
Common Wealth Fina	nci		On which entry in Part 1 or Part 2 did you list the original creditor?		
245 Main Street			Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street	· ··—		Part 2: Creditors with Nonpriority Unsecured		
		 	Claims		
Dickson City	PA State	18519 ZIP Code	Last 4 digits of account number		
lame			On which entry in Part 1 or Part 2 did you list the original creditor?		
HE INC			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
lumber Street		·	Part 2: Creditors with Nonpriority Unsecured		
	· · · · · · · · · · · · · · · · · · ·		Claims		
Dity	State	ZIP Code	Last 4 digits of account number		
Name			On which entry in Part 1 or Part 2 did you list the original creditor?		
			Line of (Check one): 🚨 Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
			Last 4 digits of account number		
City	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?		
Varne					
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured		
			Claims		
City	State	ZIP Code	Last 4 digits of account number		
- Calabara - Calabara - State - State - State - State - State - Calabara -	manus services and the services are the services and the services are the services and the services and the services are the services are the services and the services are the	ALLES TO SERVICE STATE OF THE SERVICE STATE S	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Dity	State	ZIP Code	Last 4 digits of account number		
Vame	man de la company de la compan		On which entry in Part 1 or Part 2 did you list the original creditor?		
4¢1 ⊓E			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured		

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 52 of 88

Debtor 1

Sabrina

Danielle

Victory

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Portfolio Recovery A,			On which entry in Part 1 or Part 2 did you list the original creditor?
Name 120 Corporate Blvd Ste	100		Line 4.38 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			☑ Part 2: Creditors with Nonpriority Unsecured Clain
Norfolk	VA	23502 ZIP Code	Last 4 digits of account number
Portfolio Recovery A,	State	ZIP Code	On this bank is Dated and Dated did not be the control of the cont
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
120 Corporate Blvd Ste	100		Line 4.39 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			☑ Part 2: Creditors with Nonpriority Unsecured Claims
Norfolk	VA	23502	Last 4 digits of account number
ity 	State	ZIP Code	
lame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Cope	Last 4 digits of account number
lame			On which entry in Part 1 or Part 2 did you list the original creditor?
same.			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
fumber Street			Part 2: Creditors with Nonpriority Unsecured Claims
Dity	State	ZiP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one):
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims
Sity	State	ZIP Code	Last 4 digits of account number
lame			On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Silet:			Part 2: Creditors with Nonpriority Unsecured Claims
Dity	State	ZIP Code	Last 4 digits of account number
lame			On which entry in Part 1 or Part 2 dld you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Strast			Part 2; Creditors with Nonpriority Unsecured Claims
·-	_	_	
itv	State	ZIP Code	Last 4 digits of account number

ZIP Code

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 53 of 88

Debtor 1

Sabrina

Danielle

Victory

Case number (# known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Law Offices Of Mitchell On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.40 of (Check one): Part 1: Creditors with Priority Unsecured Claims 3400 Texoma Parkway Suite 100, Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ __ __ Sherman TΧ 75092 ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Last 4 digits of account number ____ _ _ _ _ _ On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ _ State ZIP Code THE COLUMN AND A SECURITION OF THE PARTY OF On which entry in Part 1 or Part 2 did you list the original creditor? Name Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Street Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ __ __ ZIP Code State City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____ State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Street Number □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ __ __ City State On which entry in Part 1 or Part 2 did you list the original creditor? Name Line ____ of (Check one): D Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims

City

State

Z!P Code

Last 4 digits of account number ____

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 54 of 88

Debtor 1

Sabrina First Name

Danielle

Middle Name

Victory

Case number (if known)_

Last Name List Others to Be Notified About a Debt That You Already Listed

Portfolio Recovery A Name 120 Corporate Blvd Ste 100 Number Sircet			On which entry in Part 1 or Part 2 did you list the original creditor?			
			Line 4.43 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
			☑ Part 2: Creditors with Nonpriority Unsecured Claim			
Narfalk	VA	23502	Last 4 digits of account number			
City	State	ZIP Code	TOOL TO A TITLE WAR TO A TELL SEAT TO THE SEATH WESTERS WAS TREED AND TREED			
Portfolio Recovery A			On which entry in Part 1 or Part 2 did you list the original creditor?			
120 Corporate Blvd St	e 100		Line 4.44 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured			
			Claims			
Norfolk City	VA State	ZIP Code	Last 4 digits of account number			
BBEER REPORTED BBEET WAS AUGUSTED	uga na na gili kilikuwu vigi gip 60000wu wasan na 1	Parkethining 2 52 III II all all reference of the	On which entry in Part 1 or Part 2 did you list the original creditor?			
Name			Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured			
			Claims			
ity State ZIP Code		Z(P Code	Last 4 digits of account number			
ame		····	On which entry in Part 1 or Part 2 did you list the original creditor?			
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Numbe: Street	· · · · · · · · · · · · · · · · · · ·		☐ Part 2: Creditors with Nonpriority Unsecured			
	- <u>-</u>		Claims			
City	State	ZIP Code	Last 4 digits of account number			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?			
			Line of (Check one); Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured			
			Claims			
City	Stale	ZIP Code	Last 4 digits of account number			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?			
			Line of (Check one): Depart 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured			
			Claims			
City	State	ZIP Code	Last 4 digits of account number			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?			
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured			
	 _		Claims			

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 55 of 88

Debtor 1

Sabrina

Danielle

Victory 1 and 1 and 1

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

Case number (if known)__

Part 3:

List Others to Be Notified About a Debt That You Already Listed

CMRE Financial Se	ervices		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name 3075 E Imperial Hwy Ste 200			Line 4.49 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims			
Number Street	7y 3te 200	<u> </u>	Part 2: Creditors with Nonpriority Unsecured Claim			
Brea	CA State	92821 ZIP Code	Last 4 digits of account number			
CMRE Financial Se	ra rasen y lanige a		On which entry in Part 1 or Part 2 did you list the original creditor?			
3075 E Imperial Hw	vy Ste 200		Line 4.50 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
rumber Street			Part 2: Creditors with Nonpriority Unsecured Claims			
Brea	CA State	92821 ZIP Code	Last 4 digits of account number			
Varne	amana deg \$ 1 1 11 Tillakon de er 9 A ^{rte m} ild 900 o ₂ en 19 g Mille 1	- Lindiggles com- ^{am} ry courses a compglitude of 1928s	On which entry in Part 1 or Part 2 did you list the original creditor?			
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims			
Dity	State	ZIP Code	Last 4 digits of account number			
lame			On which entry in Part 1 or Part 2 did you list the original creditor?			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
			Part 2: Creditors with Nonpriority Unsecured Claims			
City	Slate	ZIP Code	Last 4 digits of account number			
Vame			On which entry in Part 1 or Part 2 did you list the original creditor?			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
			Part 2: Creditors with Nonpriority Unsecured Claims			
Dity	State	ZIP Code	Last 4 digits of account number			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
			Claims Part 2: Creditors with Nonpriority Unsecured			
ily «Olwanaga (1128 cennoun valaga , 1175 ce	State	ZIP Code	Last 4 digits of account number			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
	·		Part 2: Creditors with Nonpriority Unsecured Claims			
City	State	ZfP Code	Last 4 digits of account number			

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 56 of 88

Debtor 1 Sabrina Danielle Victory Case number (# known)

Pa	43

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only, 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	Domestic support obligations	6a.	\$
from Part 1	6b	Taxes and certain other debts you owe the government	6b.	\$
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+3
	6e.	Total. Add lines 6a through 6d.	ве.	\$
				Total claim
Total claims	6f.	Student loans	6f.	_{\$} 65,331.96
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$ 57,404.19
	6j.	Total. Add lines 6f through 6i.	6j.	122.736.15

Fill in this i	nformation to id	entify your case:			
_	Sabrina	Danielle	Victory		
Debtor	First Name	Middle Name Elizabeth	Last Name Victory		
Debtor 2 (Spouse If filing	Brianna First Name	Middle Name	Last Name		
United States	Bankruptcy Court f	or the: Middle District of P	lorida		
Case numbe (If known)	·				Check if this is an amended filing
Official	Form 1060	<u>G</u>			
Sched	ule G: E	xecutory Co	ntracts and	Unexpired Leases	12/15
iformation. dditional pa	If more space is iges, write your	needed, copy the addi name and case number	tional page, fill it out, nu · (if known).	ogether, both are equally responsible for supp umber the entries, and attach it to this page. C	
₩ No.	Check this box an		ourt with your other sched	dules. You have nothing else to report on this for e listed on <i>Schedule A/B: Property</i> (Official Form	
example				ract or lease. Then state what each contract on in the instruction booklet for more examples of	
Person	or company with	n whom you have the co	ontract or lease	State what the contract or lease is fo	or
1					
Name				_	
Number	Street			_	
City		State ZIP Code		_	
2		State Zir Code		менто на принаменти при примами на принамента и принамента на принамента на принамента на принамента на принаме	sossabiliisanaassassaassassassassassassassassassas
Name				_	
Numbra				_	
Number 	Street				
City		State ZIP Code		The state of the s	::::::::::::::::::::::::::::::::::::::
3 Name				-	
				_	
Number	Street				
City		State ZIP Code	Andrew Commencer Charles and Andrews	- CAMAMAY - majamaya Marana a populaway - carana a Maranaya - cawaa a paga a cawaa a cawaa a cawaa a cawaa a c	eshibebrangostasasekepinininasesekstitittätäbeillinin
.4. Nome				_	
Name					
Number	Street			-	
City		State ZIP Code			TOTAL SANIKA MATERIA HARAN KANAZARAM BUTU TUTU TU
.5					
Name				-	
Number	Street			_	
City		State ZIP Code		_	

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 58 of 88

Debtor 1	Sabrina First Name	Danielle Last Name Last Name	Victory	Case number (if known)
	_		.	
_		age if You Have More		
	on or company w	rith whom you have the o	contract or lease	What the contract or lease is for
2. <u>2</u> Name				_
		· · · · · · · · · · · · · · · · · · ·		_
Numl	ber Street			_
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2 Nam				_
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Name	e			_
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Name	<u> </u>			
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		<u> </u>		_
City		State ZIP Code		######################################
2 Name				_
				_
Numi	ber Street			
City		State ZIP Code		_

Fill in this	Information to id	entify your case:				
Debtor 1	Sabrina First Name	Danielle Middle Name	Victory Last Name	[
Debtor 2	Brianna	Elizabeth	Victory Last Name	 [
(Spouse, if filir		Middle Name				
		or the: Middle District of i	-ionua	{		
Case number (If known)	er				☐ Che	ck if this is an
						nded filing
Official	Form 106	Н				
		_ our Codebt	ors			12/15
are filing tog and number case number	gether, both are e r the entries in the er (if known). Ans	equally responsible for	supplying corre ach the Addition	ct information. If al Page to this pa	as complete and accurate as possible. If two more space is needed, copy the Additional Pa age. On the top of any Additional Pages, write as a codebtor.)	ge, fill it out,
U No ⊠ Yes						
2. Within	the last 8 years,	-		-	(Community property states and territories inclishington, and Wisconsin.)	ude
	Go to line 3.					
	=	, former spouse, or legal	equivalent live wi	th you at the time	?	
		nmunity state or territory	aia vouiuoaCalif	fornia	. Fill in the name and current address of that per	non.
	res. In winch con	induity state of territory	ala you live ! Sam	- Contribution	Fill in the hame and current address of that per	SOII.
	117/				-	
	910 E 18th St Number Street	former spouse, or legal equivale	nı		-	
	National City	CA		91950		
	City	State		ZIP Code	-	
shown Schedi Schedi	in line 2 again as ule D (Official For ule E/F, or Sched	a codebtor only if tha m 106D), Schedule E/F ule G to fill out Columr	t person is a gua - (Official Form 1	rantor or cosign	or if your spouse is filing with you. List the per er. Make sure you have listed the creditor on lule G (Official Form 106G). Use Schedule D,	
Colum	nn 1: Your codebt	or			Column 2: The creditor to whom you o	we the debt
2.1					Check all schedules that apply:	
3.1 Bria	anna Indorato				Schedule D, line 2.3	
140116					☐ Schedule E/F, line	
Numbe	er Street				☐ Schedule G, line	
City		Sta	ste	ZIP Code		
3.2 Bria	nna Indorato				Schedule D, line	
rvanne			_	_	Schedule E/F, line 4.33	
Numbe	er Street				Schedule G, line	
City		Sta	ate .	ZIP Code		
3.3						
Name					Schedule D, line	
Numbe	er Street				Schedule E/F, line	
14011100	c. Grace				Schedule G, line	
City	 	Sta	ate	ZIP Code		e o o o o o o o o o o o o o o o o o o o

Official Form 106H

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 60 of 88

Debtor 1	Sabrina First Name M	Danielle Iddle Name Last	Victor	У	Case number (d known)
_	Firstivajne ivi	iroue vame Lasi	Name		
	Additional Pa	ige to List More C	odebtors		
Colum	nn 1: Your codebt	tor			Column 2: The creditor to whom you owe the deb
-]					Check all schedules that apply:
الم Name					Schedule D, line
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Numbe	er Street				□ Schedule G, line
Cily			State	ZIP Code	· · · · · · · · · · · · · · · · · · ·
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Numbe	er Street				☐ Schedule G, line
-		<u></u>	0	Tim D. J.	<u></u>
City		•	State	ZIP Code	
Name					Schedule D, line
					☐ Schedule E/F, line
Numb	er Street				Schedule G, line
City			State	ZIP Code	
·					Schedule D, line
Name					☐ Schedule E/F, line
Numbe	er Straet				☐ Schedule G, line
City			State	ZIP Code	
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ичалте					☐ Schedule E/F, line
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Numbe	er Street		-		Schedule G, line
Gity_			State	ZIP Code	
<u> </u>					Schedule D, line
Name					☐ Schedule E/F, line
Numbe	er Street				Schedule G, line
_					
City			State	ZIP Code	

		your case:		_		
Debtor 1		Danielle	Victory	_		
ebtor 2 Spouse, if filing)		Middle Name Elizabeth Middle Name	Last Name Victory Last Name		-	
		Middle District of Florida	Lastryille			
		Middle District Of Florida				
lase number If known)			-		Check if ti	
						ended filing
						plement showing postpetition chapter 13 as of the following date:
	orm 106I	-			MM / D	D/ YYYY
ched	lule I: You	ır Income				12/15
parate shee		top of any additional p				use. If more space is needed, attach a nown). Answer every question.
Fill in you informatio	r employment on.		Debtor 1	prepres population		Debtor 2 or non-filling spouse
attach a se	e more than one job, eparate page with n about additional	Employment status	☑ Employed ☐ Not employe	ed		☐ Empioyed ☑ Not employed
Include pa self-emplo	irt-time, seasonal, or yed work.	Occupation	RSR			
	n may include student aker, if it applies.	Occupation		_		
		Employer's name	Frito-Lay			
		Employer's address				
			Number Street			Number Street
			City	Stat	z IP Code	City State ZIP Code
		How long employed th	iere? 6 months			6 months
		iong omproyed to	0111011010			
Part 2:	Give Details About		<u>o monato</u>			
Estimate r	monthly income as of	t Monthly Income		ng to	report for any line, w	rite \$0 in the space. Include your non-filing
Estimate r spouse uni	monthly income as of less you are separated our non-filing spouse hi	t Monthly Income the date you file this fo	rm. If you have nothin	•		rite \$0 in the space. Include your non-filing or that person on the lines
Estimate r spouse uni	monthly income as of less you are separated our non-filing spouse hi	t Monthly Income the date you file this fo	rm. If you have nothin	•		
Estimate r spouse uni If you or yo below. If yo	monthly income as of less you are separated our non-filing spouse ha ou need more space, a thly gross wages, sal	t Monthly Income the date you file this fo	rm. If you have nothing yer, combine the informathis form,	•	on for all employers f	or that person on the lines For Debtor 2 or
Estimate r spouse uni If you or yo below. If you below to be the control of the control to be the control of th	monthly income as of less you are separated our non-filing spouse ha ou need more space, a thly gross wages, sal	t Monthly Income The date you file this follower ave more than one employitach a separate sheet to ary, and commissions (it calculate what the month	rm. If you have nothing yer, combine the informathis form,	rmatio	For Debtor 1	or that person on the lines For Debtor 2 or

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 62 of 88

Debtor 1	Sabrina First Name	Danielle Middle Name Last Name	Victory		Ca	ise number (if kn	nawn)			
					For	Debtor 1		otor 2 or		:
Сор	y line 4 here		••••••	→ 4.	\$	2,333.33	\$	CONTRACTOR OF THE PROPERTY OF		
5, List	all payroll deduct	ions:								
5a.	. Tax, Medicare, a	nd Social Security deduct	ions	5a.	\$		\$			
	•	ibutions for retirement pla		5b.	_					
5c.	Voluntary contri	butions for retirement pla	ns	5c.	\$. \$			
5d.	Required repaym	nents of retirement fund le	ans	5d.	\$_	·	. \$:
5e.	Insurance			5e.	\$. \$			
5f.	Domestic suppo	rt obligations		5f.	\$		\$			1
5g.	Union dues			5g.	\$. \$			
5h.	Other deduction	s. Specify:		5h.	+\$_		+ \$			
6. A d	d the payroll dedu	uctions. Add lines 5a + 5b	+ 5c + 5d + 5e +5f + 5g + 5	5h. 6.	\$	0.00	\$			
7. C a	iculate total mont	hly take-home pay. Subtra	ct line 6 from line 4.	7.	\$_	2,333.33	\$:
8. Lis i	t all other income	regularly received:								
8a.	Net income from profession, or fa	rental property and from	operating a business,							
		nt for each property and bus and necessary business ex ne.		8a.	\$. \$			
8b	. Interest and divi	dends		8b.	\$		\$			
8c.	Family support pregularly received	payments that you, a non-	filing spouse, or a depen	ident						
		spousal support, child support operty settlement.	ort, maintenance, divorce	Bc.	\$		\$_ <u></u>			:
	Unemployment of	compensation		8d.	\$:
	. Social Security			8e.	\$		\$			
8f.	include cash assist that you receive, s Nutrition Assistan	nt assistance that you reg stance and the value (if kno such as food stamps (benef ce Program) or housing sub	wn) of any non-cash assisits under the Supplementa	tl	e		e			:
	Specify:			_ 8f.	3_		Ψ			
8g	. Pension or retire	ment income		8g.	\$		\$:
8h	. Other monthly in	come. Specify:		8h.	+\$		+ \$			
9. Ad	d all other income	e. Add lines 8a + 8b + 8c + 8	3d + 8e + 8f +8g + 8h.	9.	\$		\$]	
		come, Add line 7 + line 9. 10 for Debtor 1 and Debtor	2 or non-filing spouse.	10.	\$	2,333.33	+		= s_	2,333.33
Incl	_	r contributions to the export om an unmarried partner, n	<u>-</u>			ents, your roc	ommates, and	d other		:
	•	ounts already included in lir					nses listed in	Schedule J.	+ s	(
12. Ad ¢	the amount in th	e last column of line 10 to he Summary of Your Assets	the amount in line 11, T	he result	is the	cambined mo	-		\$	nbined
	you expect an inc	crease or decrease within	the year after you file th	is form?					moi	nthly income

Fill in this	s information to ide	otity your case:					
	Sabrina		Victory				
Debtor 1	First Name	Middle Namé	Last Name	Check if thi	s is:		
Debtor 2 (Spouse, if fil	Brianna ing) First Name	Elizabeth V	Last Name	— An ame		_	
United Stat	es Bankruptov Court fo	rthe: Middle District of Florida				showing postp the fallowing	etition chapter 13
Case numb							uale.
(If known)	Jei		- 	MM / DC) / YYYY		
Officia	l Form 106J						
Sche	dule J: Y	our Expense	es				12/15
informatio		needed, attach another sheet		ng together, both are equally re . On the top of any additional p			
Part 1:	Describe Your	Household				_	
1 is this a	joint case?						
	Go to line 2. Does Debtor 2 live	in a separate household?					
	☑ No ☑ Yes. Debtor 2 m	ust file Official Form 106J-2, Ex	penses for S	eparate Household of Debtor 2.			
Do you l	nave dependents?	∡ No				Donos do 42-	Dan danamark live
Do not lis	st Debtor 1 and	Yes. Fill out this info each dependent		Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Do not st	ate the dependents	See the second second second			_		□ No □ Yes
names.							□ No
							Yes
							□ No
					-		☐ Yes
							□ No
							Yes
							□ No □ Yes
						•	
expense	expenses include is of people other the and your depender	1/22					
Part 2:	Estimate Vous O	ngoing Monthly Expenses		the same and the same			
_		~~~~~~		re using this form as a suppler	nent in a	a Chapter 13 c	ase to report
	as of a date after the	· ·		ental Schedule J, check the box		•	
	•	h non-cash government assis	•			Your expe	nsoe
		luded it on <i>Schedule I: Your I</i>	-	•	•	- Car Oxpo	A COLUMN TO SERVICE DE LA COLU
	tal or name owners t for the ground or lo	ship expenses for your reside t	nce. Include	first mongage payments and	4.	\$	700.00
If not in	ocluded in line 4:						
4a, Re	eal estate taxes				4a.	\$	
4b. Pr	aperty, hameowner's	s, or renter's insurance			4b.	\$	15.00
4c. Ho	ome maintenance, re	pair, and upkeep expenses			4c.	\$	
4d. Ho	omeowner's associat	ion or condominium dues			4d.	\$	

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 64 of 88

Victory Danielle Sabrina Debtor 1 Case number (if known)__ Last Name First Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans 5 **Utilities:** 75.00 Electricity, heat, natural gas 6a 6a 75.00 Water, sewer, garbage collection 6b 250.00 Telephone, cell phone, Internet, satellite, and cable services 60 60 Other, Specify: 6d 6d. 400.00 Food and housekeeping supplies 7. Childcare and children's education costs 8. 8. 140.00 Clothing, laundry, and dry cleaning 9 Personal care products and services 10 10 Medical and dental expenses 11 Transportation. Include gas, maintenance, bus or train fare. 12. Do not include car payments. 12. Entertainment, clubs, recreation, newspapers, magazines, and books 13. 13 Charitable contributions and religious donations Insurance. 15. Do not include insurance deducted from your pay or included in lines 4 or 20. 13.00 15a. Life insurance

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 65 of 88

Debtor		Danielle die Name Ca	Vic	tory	Case number (if kno	own)			
21. Ot	her. Specify:					21.	+\$		
22. C a	lculate your monthly e	expenses.							
22	a. Add lines 4 through 2	1.				22a.	\$	2,898.00	
22	b. Capy line 22 (monthly	expenses for Det	otor 2), if any, fro	m Official Form 106J	-2	22b.	\$		414040
22	c. Add line 22a and 22b	. The result is your	monthly expens	es.		22c.	\$	2,898.00	The second second
	culate your monthly ne) f = 0 /				\$	2,333.33	
23a	Copy line 12 (your co	ombined monthly in	come) from Sch	edule I.		23a.	*		
23b	Copy your monthly e:	xpenses from line	22c above			23b.	-\$	2,898.00	
23c.	Subtract your monthl The result is your <i>mo</i>		our monthly inco	me.		23c.	\$	-564.67	
24. Do	you expect an increas	e or decrease in y	our expenses v	vithin the year after	you file this form?				
	example, do you expec tgage payment to incres		•	•					
∡í	No.								
	Yes. Explain here:								**
									:

n this in	formation to iden	itify your case:							
or 1	Sabrina	Danielle	Victory						
	First Name	Middle Name	Last Name						
or 2 ise, if filing)	Brianna Flist Name	Elizabeth Middle Name	Victory Last Name						
		the: Middle District of Flo	orida						
		the. Middle District of Fit	Dilda						
number own)								_	
									ck if this
•								ame	nded fili
		_ • ,		VI ŞUPDIVIII	g correct in	ivilliativii.			
Did you	money or propert both. 18 U.S.C. §§	enever you file bankrup by by fraud in connection 152, 1341, 1519, and 38 152, 1341, 1519, and 38	on with a bankruptcy (ended scha case can ro	esult in fines	ng a false sta s up to \$250,0			
taining i ars, or b Did you	money or propertooth. 18 U.S.C. §§ Sign Below u pay or agree to	by by fraud in connection 152, 1341, 1519, and 38 152, 1341, 1519, and 38 152, 1341, 1519, and 38 152, 152, 153, 153, 154, 154, 154, 154, 154, 154, 154, 154	on with a bankruptcy of 571.	ended scha case can ro	dules. Makines in fines	ng a false sta s up to \$250,0	000, or impr	isonment fo	r up to 2
taining i ars, or b Did you	money or propertooth. 18 U.S.C. §§ Sign Below u pay or agree to	ty by fraud in connection 152, 1341, 1519, and 35	on with a bankruptcy of 571.	ended scha case can re lp you fill o	dules. Makii esult in fines ut bankrupte	ng a false sta s up to \$250, cy forms?	000, or impr	isonment fo	r up to 2
taining i ars, or b Did you	money or propertooth. 18 U.S.C. §§ Sign Below u pay or agree to	by by fraud in connection 152, 1341, 1519, and 38 152, 1341, 1519, and 38 152, 1341, 1519, and 38 152, 152, 153, 153, 154, 154, 154, 154, 154, 154, 154, 154	on with a bankruptcy of 571.	ended scha case can re lp you fill o	dules. Makines in fines	ng a false sta s up to \$250, cy forms?	000, or impr	isonment fo	r up to 2
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Did you Did you No Yes	money or propertion. 18 U.S.C. §§ Sign Below u pay or agree to s. Name of person from the p	by by fraud in connection 152, 1341, 1519, and 38 pay someone who is Name of the Weaver (Court of the Weaver) and the work of the weaver (Court of the Weaver) and the work of the weaver of the weave	Source, Inc)	lp you fill o	dules, Makingsult in fines ut bankrupte ch Bankruptey ature (Official i	ng a false sta s up to \$250, cy forms? Petition Prepar Form 119).	000, or impr	isonment fo	r up to 2
Did you Did you No Yes	money or propertion. 18 U.S.C. §§ Sign Below u pay or agree to s. Name of person from the p	by by fraud in connection 152, 1341, 1519, and 38 pay someone who is Name of the Weaver (Court of the Weaver) and the work of the weaver (Court of the Weaver) and the work of the weaver of the weave	on with a bankruptcy of 571. IOT an attorney to hell Source, Inc.,.)	lp you fill o	dules, Makingsult in fines ut bankrupte ch Bankruptey ature (Official i	ng a false sta s up to \$250, cy forms? Petition Prepar Form 119).	000, or impr	isonment fo	r up to 2

ebtor 1	Sabrina	Danie	lle de Name	Victory Last Name		
btor 2	First Name Brìanna	Elizal	beth	Victory		
	ing) First Name		die Name	Last Name	}	
	es Bankruptcy Court fo				}	
ise numb known)	er					Check if this is an
						amended filing
ficia	Form 107	_				
ateı	ment of Fi	nancia	ıl Affai	rs for Individ	luals Filing for Bank	ruptcy 04/1
as com	plete and accurate	as possible	e. If two mar	ried people are filing to	gether, both are equally responsible	for supplying correct
rmatio	n. If more space is	needed, att	tach a separ	ate sheet to this form.	On the top of any additional pages, w	rite your name and case
iber (if	knowп). Answer ev	very questic	on.			
art 1:	Give Details At	out Your	Marital Sta	atus and Where You	Lived Before	
What i	s your current mar	ital status?				
🗹 ма	arried					
	nt married					
	it maineo					
	it matrieu					
		ave you live	ed anywhere	e other than where you	live now?	
During	g the last 3 years, h					
During	g the last 3 years, h			e other than where you years. Do not include wh		
During No Ye	g the last 3 years, h			years. Do not include wi		Dates Debtor 2
During No Y Ye	the last 3 years, h			years. Do not include wi	nere you live now.	Dates Debtor 2 lived there
During ☐ No ☑ Ye	the last 3 years, h			years. Do not include wi Dates Debtor 1 D lived there	nere you live now.	lived there
During ☐ No ☑ Ye	the last 3 years, h	es you lived		years. Do not include with Dates Debtor 1 Dates Debtor 1 Date there	nere you live now.	lived there Same as Debtor
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During No Ye	the last 3 years, he s. List all of the place Debtor 1:	es you lived		years. Do not include with Dates Debtor 1 Dates Debtor 1 Date there	nere you live now. Debtor 2: Same as Debtor 1	lived there Same as Debtor
During No Ye	the last 3 years, he so List all of the place Debtor 1:	es you lived	in the last 3	years. Do not include with Dates Debtor 1 Dived there	nere you live now. Debtor 2: Same as Debtor 1	lived there ☑ Same as Debtor From
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During No Ye	the last 3 years, he is. List all of the place Debtor 1: 1015 NE 6th Avenue Street Crystal River	es you lived re	in the last 3	years. Do not include with Dates Debtor 1 Delived there From 03/01/2019 To	Pebtor 2: Same as Debtor 1 Number Street City State ZIP 0	lived there ✓ Same as Debtor From To
During No	the last 3 years, he is. List all of the place bebtor 1: 1015 NE 6th Avenumber Street Crystal River	es you lived /e FL State	in the last 3	years. Do not include with Dates Debtor 1 Delived there From 03/01/2019 To	nere you live now. Sebtor 2: Same as Debtor 1 Number Street	lived there ✓ Same as Debtor From To
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During ☐ No ☐ Ye	the last 3 years, he is. List all of the place Debtor 1: 1015 NE 6th Avenumber Street Crystal River City 14905 SW 47th Number Street	es you lived /e FL State Ct	in the last 3 34428 ZIP Code	years. Do not include with Dates Debtor 1 Dived there From 03/01/2019 To	Pebtor 2: Same as Debtor 1 Number Street r City State ZIP (Number Street	lived there ✓ Same as Debt From To Code ✓ Same as Debt From To
During No	the last 3 years, he is. List all of the place obettor 1: 1015 NE 6th Avenue Street Crystal River City 14905 SW 47th Number Street Ocala City	es you lived /e FL State Ct	34428 ZIP Code	years. Do not include with there Dates Debtor 1	Pebtor 2: Same as Debtor 1 Number Street T City State ZIP 0 Number Street City State ZIP 0	Same as Debto From To Code From To From To P Code
During No Ye	the last 3 years, he is. List all of the place behter 1: 1015 NE 6th Avenue Street Crystal River City 14905 SW 47th Number Street Ocala City the last 8 years, d	es you lived /e FL State Ct FL State	34428 ZIP Code 34473 ZIP Code	years. Do not include with Dates Debtor 1 Dived there From 03/01/2019 To From 09/01/2018 To 02/28/2019	Pebtor 2: Same as Debtor 1 Number Street r City State ZIP (Number Street	Same as Debto From To Code From To P Code Ived there
During No Ye	the last 3 years, he s. List all of the place better 1: 1015 NE 6th Avenue Street Crystal River City 14905 SW 47th Number Street Ocala City the last 8 years, deand territories included	es you lived /e FL State Ct FL State	34428 ZIP Code 34473 ZIP Code	years. Do not include with Dates Debtor 1 Dived there From 03/01/2019 To From 09/01/2018 To 02/28/2019	Pebtor 2: Same as Debtor 1 Number Street T City State ZIP (Number Street Zient in a community property state or	From To P Code Ived there Same as Debtor From To P Code Ived there Same as Debtor From To P Code

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 68 of 88

btor 1	Sabrina First Name	Danielle Middle Name Last N	Victory	Case nu	mber (if known)	
Fi	ll in the total amount	of income you received	t or from operating a bu from all jobs and all busi me that you receive toget	nesses, including part-tir		ndar years?
□ VZ	No Yes. Fill in the det	ails.				
			Debtor 1		Debici 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
		of current year until d for bankruptcy:	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$28,000.00	Wages, commissions, bonuses, tipsOperating a business	§32,000.00
	For last calenda	-	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$1,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar	r year before that:	₩ages, commissions, borruses, tips	s 32,000.00	Wages, commissions, bonuses, tips	s 32,000.00
	(January 1 to Dec	cember 31, <u>2017</u>)	Operating a business	\$32,000.00	Operating a business	\$02,000.00
	No	·	ach source separately. Do	o not include income tha	t you listed in line 4. Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		of current year untiled for bankruptcy:				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		\$		\$
	For last calenda	ar year:		\$		\$
	(January 1 to De	cember 31,2018)				
		r year before that:		\$		\$
	(January 1 to De	cember 31,2017)				\$
				*		

Debtor 1	Sabrina	Danielle	Victory_		Case nu	mber (it known)	
	First Name	Middle Name Last Name				-	
	_						
Part 3:	List Certai	n Payments You Made B	efore You Filed	for Ban	kruptcy		
		_		_			
	95 D - 6 4 41.			-0			
6. Are ei	ither Deptor 1's	s or Debtor 2's debts primar	lly consumer debts	57			
. □ Ni		i <mark>tor 1 nor Debtor 2 has prim</mark> an individual primarily for a pe				defined in 11 U.S.C. § 101	(8) as
	During the 9	0 days before you filed for bar	ıkruptcy, did you pa	y any cre	editor a total of \$	6,825* or more?	
	🔲 No. Go t	o line 7.					
	tota	below each creditor to whom al amount you paid that credito d support and alimony. Also, o	ir. Do not include pa	ayments f	for domestic sup	port obligations, such as	
		adjustment on 4/01/22 and ev			•	· · ·	
21 v	oo Dabtard on	Debtor 2 or both have prima	anily an aryonal date				
· • • • • • • • • • • • • • • • • • • •		O days before you filed for bar			uditar a tata) as s	EDD or more?	
	_	•	iki upicy, did you pa	y arry cre	olor a lolal of a	ooo or more?	
	🗖 No. Go 1	o line 7.					
	cre	below each creditor to whom ditor. Do not include payment nony. Also, do not include pay	s for domestic suppi	ort obliga	tions, such as cl	hild support and	
			Dates of payment	Total a	mount paid	Amount you still owe	Was this payment for
	Suba	ru Finance	05/12/2019	\$	1,680.00	\$	☐ Mortgage
	Creditor's	Name		·			☑ Mongage ☑ Car
			04/12/2019				Credit card
	Number	Street					
			03/12/2019				Loan repayment
							Suppliers or vendors
	City	State ZIP Co	de				Other
							and the second constitution
	Hyund	dai Motor Financ	05/15/2019	\$	1,260.00	s11,636.00	☐ Mortgage
	Creditor's	Name					☑ Car
) Talbert	04/15/2019				Credit card
	Number	Street					Loan repayment
			03/15/2019				Suppliers or vendors
	Fount	ain Valley CA 92628					• •
	City	State ZIP Co	de				Other
				•		•	_
	Creditor's	Name		\$	 -	\$	☐ Mortgage
							☐ Car
	Number	Street					Credit card
							Loan repayment
			-				Suppliers of vendors
	City	State ZIP Co	da				Other
	City	State ZIP Co	ue				

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 70 of 88

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives, any general partners, relatives of any general partners, partnerships of which you are a general partner, corporations of which you are a general partner, partnerships of which you are a general partner, corporations of which you are a general partner, corporation of which you are some of their votings and which you are some payments as a see proprietor. It us c. \$ 10 Include payments for domestic support obligations, such as other payments are a see proprietor. It us c. \$ 10 Include payments to an insider. Date of Total amount Amount You still Reason for this payment over \$ 100 Yes. List oil payments that benefited an insider. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments that benefited an insider. Date of Total amount Amount Amount Amount over \$ 100 Yes. List oil payments that benefited an insider. Date of Total amount Amount Amount over \$ 100 Yes. List oil payments that benefited an insider. Sale Posse Number Street Sale Posse Sale Posse Sale Posse Sale Posse Sale Posse Sale Posse Number Street		Sabrina First Name	Danielle Widdle Name Las	Victory	-	Case number (#known)	
Matcher's include your relatives; any general partners; relatives of any general partners; creatives of any general partners; creatives of any general partners; crowner of 20% or more of 10% or more o		I list Harry	Woode Ivan is Car	Country			
Dates of payments to an insider. Dates of payment Total amount payment Reason for this payment	<i>lnsid</i> corpo agen such	ers include your re prations of which y t, including one for as child support a	latives; any general p ou are an officer, dire r a business you oper	partners; relatives of any elector, person in control, or	general partners; p r owner of 20% or i	partnerships of whic more of their voting	h you are a general partner; securities; and any managing
Dates of payment Total amount Amount you still Reason for this payment			nts to an insider				
Number State ZIP Code	_ `	es. Elec dii paymer	ito to an insider.				Reason for this payment
City State ZIP Code S		Insiner's Name			\$	\$	
City State ZIP Code S		mader 5 Home					
Insider's Name Number Street		Number Street	··				
Insider's Name Street Str							!
Number Street City State ZIP Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Include payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment paid owe Include creditor's name Number Street City State ZIP Code S		City	State ZIF	² Code		***	
Number Street City State ZiPCode Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No → Yes. List all payments that benefited an insider. → Dates of Total amount Amount you still payment Include creditor's name → S S S S Number Street → Number Street → Number Street → State ZiPCode → S S S S S S S S S S S S S S S S S S					\$. \$	
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No ✓ Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment paid owe Include creditor's name Number Stroot City State ZIP Code S		Insider's Name					:
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Insider's Name		Number Street					
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Insider's Name							
an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No ☐ Yes. List all payments that benefited an insider. ☐ Dates of payment paid		City	- 210	Code			
Number Stroet City State ZIP Code \$	laiiek:	in duine before to		tare did yan madea ann n		.f.,,	
City State ZIP Code \$ Insider's Name	an in Inclu	sider? de payments on de lo	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of	Total amount	Amount you still	Reason for this payment
City State ZIP Code \$\$ \$ Insider's Name \$	an in Inclu∙ ☑ N	sider? de payments on de lo es. List all paymen	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of	Total amount	Amount you still owe	Reason for this payment
Insider's Name	an in Inclu∙ ☑ N	sider? de payments on de lo es. List all paymer	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of	Total amount	Amount you still owe	Reason for this payment
Insider's Name	an in Inclu∙ ☑ N	sider? de payments on de lo es. List all paymer	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of	Total amount	Amount you still owe	Reason for this payment
Insider's Name	an in Inclu∙ ☑ N	de payments on de payments on de lo lo les. List all payment linsider's Name	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of payment	Total amount	Amount you still owe	Reason for this payment
	an in Inclu∙ ☑ N	de payments on de payments on de lo lo les. List all payment linsider's Name	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of payment	Total amount	Amount you still owe	Reason for this payment
Number Street	an in Inclu	de payments on de lo lo les. List all payment linsider's Name	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	an in Inclu	de payments on de lo lo les. List all payment linsider's Name	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	an in Inclu	de payments on de payments on de payments on de lo les. List all payments linsider's Name Number Stroet City Insider's Name	ou filed for bankrup ebts guaranteed or co	osigned by an insider. insider. Dates of payment	Total amount paid	Amount you still owe	Reason for this payment

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 71 of 88

or 1	Sabrina	Danielle	Victory	Case number (if known)_		
	First Name M	liddle Name Last Name				
	-					
art 4	<u> </u>	I Actions, Repossess				
				awsuit, court action, or admin divorces, collection suits, patern		
	contract disputes.	3 p. s. s. s. s. s. y		, ,	,,	,
Ø N	lo					
☐ Y	es. Fill in the detai	ls.				
		Ne	ture of the case	Court or agency		Status of the case
		:				
	Case title			Court Name		— Pending
						On appeal
				Number Street		Concluded
	Case number			City State	ZIP Code	
				Ony State	Zii Çode	•
				•		Pending
	Case title			Court Name		On appeal
				Number Street		Concluded
	_			number Street		Concluded
	Case number			City State	ZIP Code	
				· -		
	es. Fill in the inform		Describe the prope	rtv	Date	Value of the property
				9		
					1	\$
	Creditor's Name					
	Number Street		Explain what happe	·		
	Traines ellect		_			
			Property was Property was	repossessed.		
			Property was			
	City	State ZIP Code		attached, seized, or levied.		
				and a manager parameter and a contract of the first first for a contract of the first first for the first form of the first form of the first first first form of the first first form of the first fi		
			Describe the prope	rty	Date	Value of the property
			Describe the prope	rty ·	Date	Value of the property
			Describe the prope	rty	Date	Value of the property
	Creditor's Name		Describe the prope	rty	Date	
	Creditor's Name		Describe the prope	rty	Date	
	Creditor's Name Number Street		Describe the prope		Date	
			Explain what happe	ened	Date	
			Explain what happe	ened repossessed.	Date	
	Number Street		Explain what happed Property was Property was	ened repossessed. foreclosed.	Date	
		State ZIP Code	Explain what happe Property was Property was Property was	ened repossessed. foreclosed.	Date	

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 72 of 88

Debtor 1	Sabrina	Danielle	Victory	Case number (if known)		
	First Name	Middle Name Last N	ame			
			otcy, did any creditor, includir ause you owed a debt?	ng a bank or financial institution	i, set off any amo	ounts from your
∑ í	No		•			
	Yes. Fill in the deta	ails.				
			Describe the action the credito			Amount
	Creditor's Name				was taken	
				- - - -	\$	
	Number Street			:=	Ψ	
			. •			
				•		
	City	State ZIP Code	Last 4 digits of account numb	per: XXXX		
12 W/H	hin 1 year hofore	you filed for bankrunt	rv was any of your property i	n the possession of an assigne	e for the henefit	of
			cy, was any or your property r stodian, or another official?	in the possession of an assigne	e for the benefit	Ol .
Ø						
	Yes					
Part F	List Cortain	Gifts and Contribu	tions			
	2131 00114111					
13. Wit	hin 2 vears before	vou filed for bankrup	tov. did you give any gifts wit	h a total value of more than \$60	0 per person?	
Ø		,	, , , , , , , , , , , , , , , , , , ,		- F F	
	Yes. Fill in the deta	ails for each gift.				
					_	
	Gifts with a total vi	alue of more than \$600	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Go	Number Colf.		•		\$
	Person to vinom Yau Ga	ave the Gift				
						\$
	Number Street			:		
	Trainer Sheet			:		
	City	State ZIP Code				
	Person's relationship	to you		į		
	· Didding void do proping	,		and the second of the second o		
		ue of more than \$600	Describe the gifts		Dates you gave	Value
	per person				the gifts	•
						¢
	Person to Whom You Ga	ive the Gift		,		
			1			
			•			\$
				:		\$
	Number Street					\$
	Number Street					\$
	Number Street City	State ZiP Code				\$
						\$

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 73 of 88

	Sabrina First Name	Danielle Middle Name Last	Victory	Case number (if known)		
	riistivame	Miggle Name Last	: Manie			
	to o bostono					20 to one of one to 0
4. Withi ☑ N		you filed for bankru	ptcy, did you give any glfts or co	intributions with a total value	e of more than \$60	ou to any charity?
		ails for each gift or con	tribution.			
	Gifts or contribution	one to charities	Describe what you contributed		Date you	Value
	that total more than		Describe Wille you containated		contributed	• 41140
				•		
<u></u>	Charity's Name					\$
						\$
						,
N	lumber Street					
c	City State	ZIP Code				
	_					
art 6:	List Certair	n Losses				
						
	in 1 year before y ster, or gambling		tcy or since you filed for bankru	iptcy, did you lose anything	because of theft, f	ire, other
σisa.		F				
	vo 'es. Fill in the deta	iils.				
	Dogovila Aka ayana	and a constant	Dogarika adu inguranga asusasa	a fau the leve	Data of ware	Malica of wastons.
	Describe the prope how the loss occur		Describe any insurance coverage include the amount that insurance		Date of your loss	Value of property lost
			claims on line 33 of Schedule A/B:			the second second
					: 	\$
						\$
	•			······································		\$
art 7:	List Certain	Payments or Tran	sfers			\$
6. With	in 1 year before y	you filed for bankrup	tcy, did you or anyone else actir		sfer any property	
6. With	in 1 year before y consulted about	you filed for bankrup seeking bankruptcy		оп?		
. With	in 1 year before y consulted about de any attorneys,	you filed for bankrup seeking bankruptcy	tcy, did you or anyone else actir or preparing a bankruptcy petiti	оп?		
S. With you o Inclu	in 1 year before y consulted about de any attorneys,	you filed for bankrup seeking bankruptcy bankruptcy petition pro	tcy, did you or anyone else actir or preparing a bankruptcy petiti	оп?		
i. With you o Inclu-	in 1 year before y consulted about de any attorneys, lo 'es. Fill in the deta	you filed for bankrup seeking bankruptcy bankruptcy petition pro bils.	tcy, did you or anyone else actir or preparing a bankruptcy petiti eparers, or credit counseling agen Description and value of any pro	on? Icles for services required in yo Perty transferred	our bankruptcy. Date payment or transfer was	
i. With you o Inclu-	in 1 year before y consulted about de any attorneys,	you filed for bankrup seeking bankruptcy bankruptcy petition pro bils.	tcy, did you or anyone else actir or preparing a bankruptcy petiti eparers, or credit counseling agen Description and value of any pro	on? icles for services required in yo	our bankruptcy. Date payment or	to anyone
With you of Included American Young to Include American Young to Include American Includes American In	in 1 year before y consulted about de any attorneys, lo 'es. Fill in the deta	you filed for bankrup seeking bankruptcy bankruptcy petition pro bils.	tcy, did you or anyone else actir or preparing a bankruptcy petiti eparers, or credit counseling agen Description and value of any pro	on? Icles for services required in yo Perty transferred	our bankruptcy. Date payment or transfer was	to anyone
With you of Included American Young to Include American Young to Include American Includes American In	in 1 year before y consulted about de any attorneys, No 'es. Fill in the deta Person Who Was Paid	you filed for bankrup seeking bankruptcy bankruptcy petition pro bils.	tcy, did you or anyone else actir or preparing a bankruptcy petiti eparers, or credit counseling agen Description and value of any pro	on? Icles for services required in yo Perty transferred	our bankruptcy. Date payment or transfer was	to anyone
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S. With you of Include	in 1 year before y consulted about de any attorneys, No 'es. Fill in the deta Person Who Was Paid	you filed for bankrup seeking bankruptcy bankruptcy petition pro bils.	tcy, did you or anyone else actir or preparing a bankruptcy petiti eparers, or credit counseling agen Description and value of any pro	on? Icles for services required in yo Perty transferred	our bankruptcy. Date payment or transfer was	to anyone
you o	in 1 year before y consulted about de any attorneys, lo 'es. Fill in the deta	you filed for bankrup seeking bankruptcy bankruptcy petition probabils.	tcy, did you or anyone else actir or preparing a bankruptcy petiti eparers, or credit counseling agen Description and value of any pro	on? Icles for services required in yo Perty transferred	our bankruptcy. Date payment or transfer was	to anyone

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 74 of 88

	First Name	Middle Name Last	Victory Name	Case number (# known)		
				•		
					and the property of the Contraction of the Contract	erroren ar ampophilip (2007), a consequence ar are
			Description and value of any property	y transferred	Date payment or	Amount of
					transfer was made	payment
	Person Who Was Pa	ia				
	Person vono vvas Pal	iu				\$
	Number Street					·
	Number Street				1	œ
						\$
					:	
	City	State ZIP Code	14			
	,					
	Émail or website addr	ress	_			
	Person Who Made th	e Payment, if Not You				
			tcy, did you or anyone else acting o			
Z	No Yes. Fill in the de	hoile				
-	res. Fill in the de	etaiis.				
			Description and value of any property	y transferred	Date payment or	Amount of pays
					transfer was made	
	Person Who Was Pa	aid	-		. 	
						c
	Number Street					-
	Number Street		_ :		:	-
	Number Street		_ :			\$
	City iin 2 years befor		ptcy, did you sell, trade, or otherwis	e transfer any property t	o anyone, other tha	\$an property
ran: nclu Da n 2	city sin 2 years befor sferred in the or de both outright not include gifts a	re you filled for bankrup rdinary course of your transfers and transfers a nd transfers that you ha	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property	nortgage on your pro	perty).
ran: nclu Da n 2	City sin 2 years befor sferred in the or de both outright tot include gifts a No Yes. Fill in the de	re you filled for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement.	p of a security interest or ก	norigage on your pro or payments received	perty).
ran: nclu Do n	City sin 2 years before sferred in the oracle both outright out include gifts a No	re you filled for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property or debts paid in excha	norigage on your pro or payments received	perty). I Date transf was made
ran: nclu ⊃on ∑on ∑on You	City sin 2 years before sferred in the or de both outright out include gifts a No Yes. Fill in the de	re you filled for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property or debts paid in excha	norigage on your pro or payments received	perty). I Date transf was made
erans nelu ⊃on ∑on ∑on	City sin 2 years befor sferred in the or de both outright tot include gifts a No Yes. Fill in the de	re you filled for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property or debts paid in excha	norigage on your pro or payments received	perty). I Date transf was made
ran: nclu ⊃on ∑on ∑on You	City sin 2 years before sferred in the or de both outright out include gifts a No Yes. Fill in the de	re you filled for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property or debts paid in excha	norigage on your pro or payments received	perty). I Date transf was made
ran: nclu ⊃on ∑on ∑on You	City sin 2 years before sferred in the or de both outright out include gifts a No Yes. Fill in the de	re you filled for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property or debts paid in excha	norigage on your pro or payments received	perty). I Date transf was made
nclu Do n V	City sin 2 years before sferred in the or de both outright out include gifts a No Yes. Fill in the de	re you filled for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property or debts paid in excha	norigage on your pro or payments received	perty). I Date transf was made
nclu Don Main N	city sin 2 years before sterred in the or de both outright out include gifts a No Yes. Fill in the de Person Who Roceive Number Street	re you filed for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property or debts paid in excha	norigage on your pro or payments received	perty). I Date transf was made
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nclu Don Main N	city sin 2 years before sterred in the or de both outright out include gifts a No Yes. Fill in the de Person Who Roceive Number Street	re you filed for bankrup rdinary course of your transfers and transfers a nd transfers that you ha tails.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interest or n Describe any property or debts paid in excha	norigage on your pro or payments received	perty). I Date transf was made
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Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 75 of 88

ebtor 1	Sabrina First Name	Danielle Middle Name Last	Victory	Case number (if know	m)	
area ☑1	a beneficiary? (Th	nese are often called a	ptcy, did you transfer any proper sset-protection devices.)	ty to a self-settled trusi	t or similar device of w	rhich you
			Description and value of the prope	rty transferred		Date transfer
				-		was made
1	Name of trust					ļ
-			-			
eset 11,	············		M/		engagagagagan nebel tergapan kenggagagagan nebel terga	Managara (1911-1974) or or grade or as in consequent million moves
			s, Instruments, Safe Deposit			
	ed, sold, moved,		cy, were any financial accounts of	or instruments neid in y	rour name, or for your	penerit,
			or other financial accounts; cert atives, associations, and other fi		res in banks, credit un	ions,
5 10.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and a desired and a desired in	idilotal motidations.		
□ 、	res. Fill in the det	tails.				
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial Ins	titution	xxxx	☐ Checking		s
	Number Street			☐ Savings		
				Money market		
	City	State ZIP Code		☐ Brokerage		
	Olty	State Lir dode		Other		
			xxxx	Checking		\$
	Name of Financial Ins	titution		☐ Savings		
	Number Street			Money market		
				☐ Brokerage		
	City	State ZIP Code		Other		
21. Do y	rou ποw have, or	did you have within 1	year before you filed for bankru	otcy, any safe deposit t	ox or other depositor	y for
secu Mari	urities, cash, or o No	ther valuables?				
	res. Fill in the det	tails.				
			Who else had access to it?	Describe the		Do you still have it?
						□ No
	Name of Financial Ins	titution	Name			Yes
	Number Street			<u>.</u>		
	number Street		Number Street			: :
		Class 2ID Code	City State ZIP Code			

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 76 of 88

otor 1	Sabrina First Name	Danielle Middle Name L	Victory	Case number (if known)	
Have v	rou stared arone	rty in a Storage HB	it or place other than your home wit	hin 1 year before you filed for bankruptc	w?
☑ No		ity iii a storage uii	icor place office than your nome wit	init i year before you med for bankrupte;	y (
🛚 Ye	s. Fill in the deta	ils.			
			Who else has or had access to it?	Describe the contents	Do you sti have it?
					□ No
Ī	Name of Storage Facil	ity	Name		☐ Yes
ĩ	Number Street		Number Street		
			CityState ZIP Code	: 	
;	City	State ZIP Code	-		
_					
irt 9:	identify Pi	roperty You Holi	d or Control for Someone Else		
		• • • •	t someone else owns? Include any p	property you borrowed from, are storing	for,
	old in trust for so	meone.			
Ø N □ v	o es. Fill in the det	aile			
<u>.</u> .	es. (III III the uet	ans.	Where is the property?	Describe the property	Value
			time to the property:	bescribe the property	
	Owner's Name		_		•
					Ψ <u>_</u>
	Owner a realine				
	Number Street		_ Number Street		
			_ Number Street		
i	Number Street			P Code	
i		State ZIP Code		P Code	
	Number Street			P Code	
art 10	Number Street City Give Detail	is About Enviro	City State Zi	P Code	
or the p	Number Street City Give Detail	lis About Enviro	City State Zinmental Information		ses of
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er the property for the	Give Detail purpose of Part 1 ronmental law me rdous or toxic su ding statutes or means any locati- e it or used to ow rdous material me tance, hazardous all notices, releas	Ils About Environment of the following decays any federal, substances, wastes, regulations controlon, facility, or proport, operate, or utilities and anything and substances, and proceedings.	nmental information Infinitions apply: tate, or local statute or regulation or material into the air, land, soil, silling the cleanup of these substance erty as defined under any environmental law defines as a hazati, contaminant, or similar term. In the contaminant of similar term. In the cleanup of these substance is including disposal sites.	oncerning pollution, contamination, relea urface water, groundwater, or other medi es, wastes, or material. nental law, whether you now own, operate ardous waste, hazardous substance, toxi	ium, e, or c
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or the p Envir hazar inclus Site r utilize Hazar subsi	Give Detail purpose of Part 1 ronmental law me rdous or toxic su ding statutes or means any locati- e it or used to ow rdous material me tance, hazardous all notices, releas any governmenta	Ils About Environments of the following decans any federal, substances, wastes, regulations controlon, facility, or proport, operate, or utilities and anything and amaterial, pollutantes, and proceeding unit notified you to	nmental information efinitions apply: tate, or local statute or regulation or or material into the air, land, soil, s illing the cleanup of these substance erty as defined under any environm ze it, including disposal sites. environmental law defines as a haza et, contaminant, or similar term. gs that you know about, regardless that you may be liable or potentially	oncerning pollution, contamination, releaturface water, groundwater, or other medies, wastes, or material. mental law, whether you now own, operate ardous waste, hazardous substance, toxi of when they occurred. liable under or in violation of an environs	ium, e, or c mental law?
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eport as a N	Give Detail purpose of Part 1 ronmental law me rdous or toxic su ding statutes or means any locati- e it or used to ow rdous material me tance, hazardous all notices, releas any governmenta o es. Fill in the det	Ils About Environments of the following decans any federal, substances, wastes, regulations controlon, facility, or proport, operate, or utilities and anything and amaterial, pollutantes, and proceeding unit notified you to	nmental information Ifinitions apply: tate, or local statute or regulation or material into the air, land, soil, silling the cleanup of these substance it, including disposal sites. In the contaminant, or similar term. It contaminant, or similar term. It contaminant is similar term.	oncerning pollution, contamination, releaturface water, groundwater, or other medies, wastes, or material. mental law, whether you now own, operate ardous waste, hazardous substance, toxi of when they occurred. liable under or in violation of an environs	ium, e, or c mental law?
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1	Sabrina First Name	Danielle	Victory st Name	Case number (if known)	
	Filst Name	widdle Name La	isi Name		
ave	you notified any	y governmental unit	of any release of hazardous mate	rial?	
Z	lo				
」	es. Fill in the de	tails.			
			Governmental unit	Environmental law, if you know it	Date of notice
	Name of site		Governmental unit	_	
	Number Street				
	Number Street		Number Street		
			City State ZIP Code	-	
	City	State ZIP Code	_		
		y in any judicial or a	idministrative proceeding under a	ny environmental law? Include settlement	s and orders.
1 r	lo 'es. Fill in the de	taile			
• 1	es, r iii iii tiie de	tans.	Court or agency	Nature of the case	Status of the
					case
(ase title		Court Name		Pending
					On appeal
			Number Street		☐ Conclude
-	ase number		City State ZIP C		
			Gity State ZiP C	ode	
1'	Give Deta	ils About Your B	usiness or Connections to An	y Business	
֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֝֞֞֟֞֞ ֪֖֪֪֪֪֪֪֪֪֪֪֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞	A sole proprie A member of a A partner in a	etor or self-employed a limited liability cor partnership	d in a trade, profession, or other a mpany (LLC) or limited liability par	have any of the following connections to a ctivity, either full-time or part-time tnership (LLP)	any business?
			executive of a corporation		
			ing or equity securities of a corpo	ration	
		bove applies. Go to			
	es. Uneck all tha	at apply above and r	ill in the details below for each bu Describe the nature of the busine		number
	Business Name			Do not include Social S	
				EIN:	
	Number Street		*****		
			Name of accountant or bookkeep	per Dates business existed	
			_	From To	
	City	State ZIP Code	- .		
			Describe the nature of the busine	· · · · · · · · · · · · · · · · · · ·	the state of the s
	Business Name			Do not include Social S	ecurity number or HIN.
	Number Ct		_	EIN:	
	Number Street		Name of accountant or bookkeep		
			_	······································	
	City	State ZIP Code	- :	From To	
	City	State ZIP Code			

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 78 of 88

Describe the nature of the business Describe the nature of the business Employer Identification number Do not include Social Security number of ITN.	f 1 Sabrina First Name	Middle Name Last	Victory	Case number (if known)
Dusiness Name Business Name EIN:			Name	<u></u>
Dusiness Name Business Name EIN:				
Dusiness Name Business Name EIN:			Describeration of the Late	Employer Identification number
Name of accountant or bookkeeper			Describe the nature of the business	
Name of accountant or bookkseper Dates business existed	Business Name			
Nithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No				EIN:
Nithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No	Number Street			
Mithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No No Yes. Fill In the details below. Date Issued NMI/DD/YYYY Number Street City State ZIP Code Thave read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. ★ Signature of Debtor 1 Date Date Date Date Date Date Date Did you statch additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			Name of accountant or bookkeeper	Dates business existed
Mithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No No Yes. Fill In the details below. Date Issued NMI/DD/YYYY Number Street City State ZIP Code Thave read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. ★ Signature of Debtor 1 Date Date Date Date Date Date Date Did you statch additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				
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Institutions, creditors, or other parties. No Yes. Fill in the details below. Date issued Name Number Street City State ZIP Code Thave read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptey case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Signature of Debtor 1 Signature of Debtor 1 Date Date	•			
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Number Street City State ZIP Code I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. ** Signature of Debtor 1 Date Date Date Date Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				
City State ZIP Code Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date Date Date Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? No Yes Poid you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Name		MM / DD / YYYY	
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Declaration, and Signature (Official Form 119).	I have read the ar answers are true in connection wit 18 U.S.C. §§ 152, Signature of Del Date	nswers on this <i>Statemer</i> and correct. I understar th a bankruptcy case car, 1341, 1519, and 3571.	Statement of Financial Affairs for Indiano is not an attorney to help you fill on	ncealing property, or obtaining money or property by fraud prisonment for up to 20 years, or both. 2 —————————————————————————————————

Fill in this in	formation to id	entify your case:		
Debtor 1	Sabrina First Name	Danielle Middle Name	Victory Last Name	
Debtor 2 (Spouse, if filing)	Brianna First Name	Elizabeth Middle Name	Victory Last Name	
United States	Bankruptcy Court (for the: Middle District of Fl	orida	
Case number (If known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?				
Creditor's name: Subaru Finance	✓ Surrender the property. □ Retain the property and redeem it.	□ No ☑ Yes				
Description of Subaru Crosstrek property securing debt:	Retain the property and enter into a Reaffirmation Agreement.					
·	☐ Retain the property and [explain]:					
Creditor's	☐ Surrender the property.	о керенер (т. т.) у того по				
	Retain the property and redeem it.	⊻ Yes				
Description of Hyundai Elantra property securing debt:	Retain the property and enter into a Reaffirmation Agreement.					
	☐ Retain the property and [explain]:					
Creditor's name: Nissan Acceptance	☐ Surrender the property.	No				
· · · · · · · · · · · · · · · · · · ·	Retain the property and redeem it.	☑ Yes				
Description of Nissan Rogue property securing debt:	☑ Retain the property and enter into a Reaffirmation Agreement.					
	Retain the property and [explain]:					
Creditor's	☐ Surrender the property.	□ No				
name:	Retain the property and redeem it.	☐ Yes				
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	_ ,00				
	Retain the property and [explain]:					

12/15

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 80 of 88

rat 2: List Your Un rany unexpired person in the information belo ded. You may assume a	w. Do not list real estate	u listed in <i>Schedule G: E</i> leases. <i>Unexpired leases</i> operty lease if the truste	xecutory Contracts and Unexpired Leases (Official Form 106G), sare leases that are still in effect; the lease period has not yet e does not assume it. 11 U.S.C. § 365(p)(2).
r any unexpired person in the information belo ded. You may assume a Describe your unexpire	al property lease that yo w. Do not list real estate an unexpired personal pr	u listed in <i>Schedule G: E</i> leases. <i>Unexpired leases</i> operty lease if the truste	s are leases that are still in effect; the lease period has not yet
in the information belo led. You may assume a Describe your unexpire	w. Do not list real estate an unexpired personal pi	leases. <i>Unexpired leases</i> operty lease if the truste	s are leases that are still in effect; the lease period has not yet
-	ed personal property lease		
ocearie nama:		5	Will the lease be assumed?
Lessurs flame.			□ No
Description of leased property:			☐ Yes
	* * * * * * * * * * * * * * * * * * *	9.5 A MA 100 (1000) (1000)	CONTRACTOR OF THE CONTRACTOR O
Lessor's name:			□ No
Description of leased property:			☐ Yes
_essor's name:	1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	The state of the s	No
			☐ Yes
Description of leased property:			- 100
Lessor's name:			□ No
Description of leased property:			··· Yes
Lessor's name:	e enaza er e e e e e e e e e e e e e e e e e e		□ No
Description of leased property:			☐ Yes
Lessor's name:		CANANA A SA	_ No
Description of leased property:			☐ Yes
Lessor's name:	AAAAAAAAAAAA	Halland Commission Com	No
Description of leased property:			☐ Yes

Catebook Sabdina Damielle Victory Brianna Elizabeth Victory Service Brianna Elizabeth Victory Service	Fil	I in this information to id	entify your case:				Check one box o	nly as directed in this form	and in
Debtor 2 Braining Explaint Victory V	Del						Form 122A-1Sup	p:	
2 The calculation to determine if a presumption of above applies will be made under Chipter 7 Maria 5rate Sarvupuy Count for the Middle Distinct of Florida 2. The calculation to determine if a presumption of above applies will be made under Chipter 7 Maria 5rate Calculation (Ordical Form 122A-2) 3. The Mealan Eved does not apply he because of qualified military service but it could apply later.		First Name				-	1. There is no	presumption of abuse.	Ì
Case number 3. The Means Test does not apply now because of qualified military service but it could apply later. Check if this is an amended filing	(Sp	ouse, if filing) First Name	Middle Namc	Last Name			abuse applic	es will be made under Chapte	r7
Official Form 122A—1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more appace is needed, attach a separate sheet to this form: include the line number to which the additional information applies, on the top of additional page, with your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer dobts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under 37 (770Pt/2) (Official Form 122A-1suppl with his form. Part 15 Calculate Your Current Monthly Income 1. What is your maritial and filing status 2 Chock one only A torneried. Fill out Column A, lines 2-11. Married and your apouse is filling with you. Fill out both Columns A and B, lines 2-11. Living in the same household and are not legally separated. Fill out Column A, lines 2-11, do not fill out Column B. By checking this box, you declare under ponalty of perjury that you and your spouse are legally separated. Fill out Column A, lines 2-11, do not fill out Column B. By checking this box, you declare under ponalty of perjury that you and your spouse are legally separated. Fill out Column A, lines 2-11, do not fill out Column B. By checking this box, you declare under ponalty of perjury that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are living spot for reasons that do not include exading the Name's Tost requirements 11 LOS C \$707(N/TIO) S. \$707(N/TIO)		,						·	· !
Chapter 7 Statement of Your Current Monthly Income 12/15 Be a complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which the additional information applies. On the top of any space is needed, attach a separate sheet to this form, include the line number to which the additional information applies. On the top of any space of the property of the policy o									
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Be as complete and accurate as possible. If two married people are filing together, both are equalty responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies, on the top of any additional pages, write your rame and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under 5 (70fb/g/) (Official Form 122A-15upp) with this form. Not married.File out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column B, lines 2-11. Living separately or are legally separated. Fill out Column B, lines 2-11. Living separately or are legally separated. Fill out Column B, lines 2-11. Living separately or are legally separated. Fill out Column B, lines 2-11. Living separately or are legally separated. Fill out Column B, lines 2-11. Living separately or are legally separated. Fill out Column B, lines 2-11. Living separately or are legally separated. Fill out Column B, lines 2-11. Living separa	Of	ficial Form 122/	1 _1						
space is needed, attach a separate sheet to this form. Include the line number to which the additional pages, write your mame and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarity consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-15upp) with this form. Part 11 Calculate Your Current Monthly income Not married. Fill out Column A, lines 2-11. Married and your spouse is NOT filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living in the same household and are not legally separated. Fill out Column A lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living any for reasons that do not include evading the Means Test requirements. 11 U.S.C. \$707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the \$1 bill months and divide the total by 6. Fill in the average monthly income that you received from all sources, derived during the \$6 full months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if you are filling on Sephember 15, the G-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if you are fill once from that property in one column only. If you have nothing to report for any line, write \$0 in the space. 2. Your gress wages, salary, tips, bonuses, overtime, and com	Cł	apter 7 Stat	ement of You	r Curre	ent Mo	onthl	y Income	•	12/15
Not married. Fill out Column A. lines 2-11.	spad addi do n <i>Abu</i>	te is needed, attach a sertional pages, write your of the other of the primarily consumer (b) (2) (Office of the other of	parate sheet to this form. Inc name and case number (if ki ner debts or because of qua cial Form 122A-1Supp) with	thude the line nown). If you lifying milita this form.	e number to u believe tha	which that you are	e additional information	mation applies. On the top o presumption of abuse beca	of any Ause you
Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filling with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Tost requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 Or non-filling spouse	1.	What is your marital and	filing status? Check one onl	y.					
Married and your spouse is NOT filling with you. You and your spouse are:		Not married. Fill out C	Column A, lines 2-11.						
Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of periury that you and your spouse are living apart for reasons that do not include evading the Means Test requirement 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. the amount of your monthly income varied during the 6 months, add the income for all sonts and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Allmony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) 8. \$ Copy A copy A column B is Copy A column B is not filled in. Do not include payments you listed on line 3. Solution B is continuous and maintenance payments you listed on line 3. Copy A copy A column B is not filled in. Do not include payments you listed on line 3. Not income from operating a business, profession, or farm Gross receipts (before all deductions) S S Copy A before all deductions S S S Copy A before all deductions S S S S S S S S S S S S S S S S S S S	1	_					1.		
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are leving apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the avorage monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 Column B Debtor 2 Debtor 1 Debtor 2 Debtor 1 Debtor 2 Salada	T TANAL S			-	•				
under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. In U.S.C. \$ 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. \$ 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income arrived during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filling spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. All mounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from a nummarised partner, members of your household, your dependents, parents, and roommates, include regular contributions from a spouse only if Column B is not filled in. On on include payments you listed on line 3. 5. Net income from operating a business, profession, or farm \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		=		- • •					
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2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm Gross receipts (before all deductions) S. Copy Here S. Copy Ordinary and necessary operating expenses S. Copy Ordinary and necessary operating expenses S. Copy Net monthly income from rental and other real property Gross receipts (before all deductions) S. S. Copy Net monthly income from rental or other real property S. S. S. S.	MANAGERATION AND AND AND AND THE TANK AND	bankruptcy case. 11 U.S August 31. If the amount of Fill in the result. Do not income	.C. § 101(10A), For example, of your monthly income varied clude any income amount mor	if you are filir during the 6 e than олсе.	ng on Septen months, add For example	ther 15, the incore, if both s	he 6-month period ne for all 6 months pouses own the sa	would be March 1 through and divide the total by 6.	
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of your or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm S. Copy here \$ Copy here \$ S. S. Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property S. S	3.		ce payments. Do not include (payments fro	m a spouse i	f	\$	\$	
or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm S	4.	of you or your dependent from an unmarried partner and roommates. Include re	its, including child support. The members of your household, egular contributions from a sport.	Include regu your depend	lar contribution dents, parent	ons s,	\$	\$	
Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm S. S. Copy here S. S. Copy here S. S	5.		ng a business, profession,	Debtor 1	Debtor 2				
Net monthly income from a business, profession, or farm \$\$\$\$\$\$\$\$\$\$\$			deductions)	\$	\$				
6. Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property \$	Anna mara p	Ordinary and necessary of	perating expenses	- \$	\$				
Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property \$\$ \$Copy here \$\$		Net monthly income from a	a business, profession, or fam	n \$	\$	Copy here→	\$	\$	
Net monthly income from rental or other real property \$ \$\$ \$\$	6.								
ther monthly income from rental or other real property \$ \$		Ordinary and necessary or	perating expenses	- \$	- \$	_			
7. Interest, dividends, and royalties \$:	Net monthly income from r	ental or other real property	\$		Copy here	\$	\$	
	7.	Interest, dividends, and	royalties				\$	\$	

Case 3:19-bk-03800-JAF Doc 1 Filed 10/04/19 Page 82 of 88

Debtor 1 Sabrina Danielle First Name Middle Name Last Name	Victory	Case number (if known)	
		Debtor 1	Column B Debtor 2 or Thomas Spouse
8. Unemployment compensation		\$	\$
Do not enter the amount if you contend that the amount under the Social Security Act. Instead, list it here:	Ψ		
For you			
For your spouse	\$		
 Pension or retirement income. Do not include any a benefit under the Social Security Act. 	mount received that was a	\$	\$
10. Income from all other sources not listed above. Sp Do not include any benefits received under the Social as a victim of a war crime, a crime against humanity, of terrorism. If necessary, list other sources on a separate	Security Act or payments rece or international or domestic		
		\$	\$
		\$	\$
Total amounts from separate pages, if any.		+ \$	+ \$
 Calculate your total current monthly income. Add I column. Then add the total for Column A to the total for 	ines 2 through 10 for each or Column B.	s_2,333.33 +	\$ 0.00 = \$ 2,333.33 Total current monthly income
Part 2: Determine Whether the Means Test A	applies to You		
12. Calculate your current monthly income for the yea	·		government (\$175) politica proportion announce parties in a fine in each participal continuous announce for fine
12a. Copy your total current monthly income from lin	e 11	Сору	line 11 here → \$ <u>2,333.33</u>
Multiply by 12 (the number of months in a year).	•		x 12
12b. The result is your annual income for this part of	the form.		12b. \$ <u>28,000.00</u>
13. Calculate the median family income that applies to	you. Follow these steps:		
Fill in the state in which you live.	FL 1999		
Fill in the number of people in your household.	2		\$ 60,400.00
Fill in the median family income for your state and size To find a list of applicable median income amounts, go			13. \$ \$00,400.00
instructions for this form. This list may also be available	e at the bankruptcy clerk's office	ce.	
14. How do the lines compare?			
14a. Line 12b is less than or equal to line 13. On the Go to Part 3.	he top of page 1, check box 1,	There is no presumption of	f abuse.
14b. Line 12b is more than line 13. On the top of p Go to Part 3 and fill out Form 122A-2.	age 1, check box 2, The presu	imption of abuse is determi	ned by Form 122A-2.
Part 3: Sign Below	···		
By signing here, I declare under penalty of per	jury that the information on this	s statement and in any atta	chments is true and correct.
* >/	×	Dully	
Signature of Debtor 1		Signature of Debtor 2	
Date 10/02/2019		Date 10/02/2019	
If you checked line 14a, do NOT fill out or	file Form 122A-2.		
If you checked line 14b, fill out Form 122A-	-2 and file it with this form.		

ARS Account Resoluti 1643 NW 136th AVe Sunrise,FL,33323

Ascend Federal Credi 550 WM Northern Blvd Tullahoma,TN,37388

ATT Mobility 1025 Lenox Park Blvd NE, Atlanta,GA,30319

Austin Peay 601 College St Clarksville,TN,37044

Barclays Bank Delawa PO Box 8803 Wilmington,DE 19899

Capital One NA PO Box 85015 Richmond, VA, 23285

Capital One Bank USA PO BOx 30285 Salt Lake City,UT,84130

Capital One Northland Group P.O.Box 390846 Minneapolis,MN 55439

Chula Vista Emergency Room Phy P.O. BOX 1698 Arcadia,CA 91077

Chula Vista 50420 Los Angeles,CA 90074

Citicards CBNA 701E 60th St N Sioux Falls,SD 57104

Comenity Bank 2795 East Cottonwood Parkway Ste 100 Salt Lake City,UT,84092

Common Wealth Financi 245 Main Street, Dickson City,PA,18519

CMRE Financial Services 3075 E Imperial Hwy Ste 200 Brea,CA,92821

Credence Resource Manage PO Box 2300 Southgate,MI, 48195

Credit Bureau System 1947 Madison St, Clarksville,TN, 37040

Credit control LLC 5757 phantom Dr, STE 330 Hazelwood,MO 63042

Credit One Bank Po Box 98872 Las Vegas,NV 89193

Crossroads urgent care, PLLC 1690 Fort Campbell Blvd Clarksville,TN,37042

Cumberland Pathology Associates, 651 Dunlop Lane, Clarksville,TN,37043

Dept of ED/Navient PO Box 9655 Wilkes-Barre,PA,18773

Dept of Electricity 2021 Wilma Rudolph Blvd Clarksville,TN,37040

Emer Phys Svcs NY PC 1656 Champlin Ave Utica,NY,13502

FC Emergency Physcians 17240 Cortez Blvd Brooksville,FL,34601

First National Credi 500 E 60th St N Sioux Falls,SD 57104

First Premier 3820 N Louise Ave Sioux Falls,SD 57107

First Svgs-BK Blaze PO Box 5065 Sioux Falls,SD 57117

Hyundai Motor Financ 10550 Talbert Fountain Valley,CA,92628

JPMCB-Auto Finance 301 N Walnut St,Floor 09 Wilmington,DE,190801

Kay Jewelers PO Box 4485 Beaverton,OR 97076

Law Offices Of Mitchell 3400 Texoma Parkway Suite 100, Sherman,TX 75092

LVNV Funding LLC 625 Pilot Road Suite 2/3 Las Vegas,NV 89119

Medical revenue service P.O. Box 1940 Melbourne,FL 32902

Midland Funding LLC, 2365 Northside Drive, San Diego,CA 92108

MidState Skin Institute Deerwood 1630 Se 18th St Bldg 400 Ocala,FL 34471

Navy Federal Credit Union, P.O. Box 3100 Merrifield ,VA 22119

Nissan Acceptance CO PO Box 660360 Dallas,TX 75266

Patient financial services 10790 ranch Bernardo rd San Diego,CA 92127

Portfolio Recovery A, 120 Corporate Blvd Ste 100, Norfolk,VA 23502

Progressive 256 West Data Dr, Draper,UT 84020

Progressive Management S 1521 W. Cameron Ave First Floor, West Covina,CA 91790

SCA Collections 300 East Aelington Blvd, Greenville,NC,27834

Scripts Billing Correspondence 10666 North Torrey Pines RD 4S-205 La Jolla,CA 92037

Scripps Clinic, 3811 Valley Center Dr, SAn Diego, CA, 92130

Scripps Hosiptal Chula Vista 435 H St, Chula Vista,CA 91910

Sheridan Emergency Physicians, 770 West Sunrise Blvd Plantation, Florida,TX,33322

Sun coast 6801 E Hillsborough Ave Tampa,FL 33610

Syncb/Care Credit C/O P,O, Box 965036 Orlando,FL,32896

Synchrony Bank 140 Wekiva Springs Rd, Longwood,FL,32779

TFC Credit Corp 520 air park drive Tullahoma,TN 37388

UF Health P.O. Box 16051 Lewiston,ME 04243

US Bank PO Box 108 St Louis,MO,63166

US Dept of Educatio PO Box 7860 Madison,WI,53704

Valley Emergency Physcians, 1990 N Calfornia Blvd#400, Walnut Creek,CA 94596

Vanderbilt university medical center Dept 1171 P.O. Box 121171 Dallas,TX 75312

Zebit 9530 Towne Center Drive Ste 200 San Diego,CA 92121